

# **USER'S GUIDE**

## **PREVENTION ACTIVITIES DATA SYSTEM (PADS)**

### **ADP 7235A-G Forms**

**(Revised 10/01/2002)**

**California Department of Alcohol and Drug Programs**

**July 2002**



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# SECTION 1

## BACKGROUND

The Prevention Activities Data System (PADS) was implemented by the California Department of Alcohol and Drug Programs (ADP), Prevention Services Division (PSD), on January 1, 1998. This data collection system was developed because:

- The Substance Abuse Prevention and Treatment (SAPT) and Safe and Drug Free Schools and Communities Act (SDFSCA) federal block grants require the state to account for the primary prevention services delivered using these funds;
- ADP, county alcohol and drug abuse agencies, and prevention program staff need objective information about alcohol, tobacco, and other drug (ATOD) prevention needs, prevention services, and the populations served.

California's system to track prevention efforts began in the early 1990's with the ADP Prevention Data Initiative. In the spring of 1997, as a result of the need to assess the effectiveness of federal initiatives and policies and federal expenditures, the Center for Substance Abuse Prevention (CSAP) initiated the national Prevention Data Collection and Management Information System named the Minimum Data Set (MDS). Initially begun as a pilot program in eleven states, including California, the MDS pilot initiated a series of exploratory discussions involving California State and county policy makers and local service providers.

While recognizing the importance and necessity of tracking prevention service data, the emphasis of MDS on census tracking each individual's contact with prevention services was determined too labor and cost intensive in a state where the potential existed to serve over 30 million residents. It also was obvious that many of California's approximately 400 primary prevention providers did not have computer capabilities to support a database of this magnitude. Additionally, the MDS was not flexible enough to satisfy the data requirements of both the SAPT and the SDFSCA grants, as well as, collect information specific to California State and county alcohol and drug programs. ADP initiated a collaborative planning process that resulted in the development of the PADS, ADP 7235 series of forms, to meet all these needs in a single report. MDS is currently used by a number of other states.

Whereas, the national MDS data collection gathers information at the conclusion of every prevention activity, PADS was developed to present a more complete picture reflecting the overall prevention services delivered for a full fiscal year within the parameters of the six CSAP strategy areas. Obviously, annual reporting requires that counties and their service providers develop, and have in place procedures to track and monitor prevention activities. The planning of PADS took into account the following:

- The need to report prevention program information using the six CSAP strategy areas:
  1. Information Dissemination
  2. Education
  3. Alternative Activities
  4. Problem Identification and Referral Services
  5. Community Based Process
  6. Environmental
- The need to expand the prevention program data collection instrument already required in the Negotiated Net Amount (NNA) contract.
- The need to simultaneously collect state, county, and SAPT and SDFSCA grant requirements in one data collection system.
- The need to develop a collection instrument that would minimize county-level reporting efforts.

The development and implementation of PADS has ensured that California is in compliance with federal block grant requirements and enhanced the state's and counties' potential to collect, monitor, and use systematic data concerning prevention efforts. PADS should ultimately facilitate sound prevention policy decisions at both county and state levels.

Note: As of 2002, the SDFSCA block grant funds are no longer allocated to the counties via the NNA contract. Those funds are now acquired through a competitive bid process. Thus, services delivered using SDFSCA funds will no longer be reported through PADS.

Following the closing of each fiscal year, ADP prepares a series of statewide and individual county reports and distributes them to each county. These reports are also available via the web at <http://www.adp.ca.gov/PADS/padsmain.shtml>. The quality and timely distribution of these reports is directly related to the accuracy and thoroughness of the provider data submitted by the counties. These reports reflect county and state prevention activity in the following areas:

1. the total number/percent of providers using each strategy;
2. the services, service frequency, and number of persons served by strategy;
3. the service populations by strategy;
4. where services occurred by strategy;
5. the demographics by strategy and service;
6. environmental problems and approaches; and
7. environmental services and target places and events.

This User's Guide represents the thoughts and ideas of numerous county officials and service providers who have worked diligently to accurately complete the forms. Hopefully, you will find the collected wisdom of these individuals useful and meaningful. We welcome your thoughts and suggestions for enhancing the PADS User's Guide and reports to make them even more useful for California's prevention system.

## GENERAL PROCEDURES AND QUESTIONS

While the reverse side of each of the seven ADP 7235A-G forms provides basic instructions for completing that specific form, this portion of the User's Guide presents a separate discussion of each of the seven ADP 7235 forms. The format for each section is organized in a similar framework, including: (1) a brief discussion of the strategy area; (2) frequently asked questions and/or definitions concerning the completion of the form; (3) a copy of the current ADP 7235 form revised 03/02, and optional worksheets that the county/provider may wish to use (the worksheets are internal tools and are not to be submitted to ADP).

Because a number of procedures and issues are common to nearly all the forms, a discussion of these procedures and issues has been included in this introductory section:

### 1. What is the definition of primary prevention?

*Primary:* occurring first in time or sequence. *Prevention:* avert; keep from happening

- According to the Substance Abuse Prevention and Treatment (SAPT) Block Grant Application for Federal Fiscal Year 2001, "Primary prevention includes activities directed at individuals who do not require treatment for substance abuse. Such activities may include education, counseling, and other activities designed to reduce the risk of substance abuse by individuals." Note that under the SAPT Block Grant statute, "**early intervention activities are not included as part of primary prevention.**"
- Likewise, language in the state/county Negotiated Net Amount (NNA) Contract reads: "Public Health Services (PHS) Act Section 96.125:Primary Prevention ... each State/Territory shall develop and implement a comprehensive prevention program which includes a broad array of prevention strategies directed at individuals not identified to be in need of treatment. The comprehensive primary prevention program shall be provided either directly or through one or more public or nonprofit private entities. The comprehensive primary prevention program shall include activities and services provided in a variety of settings for both the general population, as well as targeting sub-groups who are at high risk for substance abuse..."
- Note: The criteria that primary prevention is for "individuals not identified to be in need of treatment" may raise issues in CSAP strategy #4 Problem Identification and Referral, which is aimed at:
  - Identification of those individuals who have indulged in illegal/age-inappropriate use of tobacco or alcohol and those individuals who have indulged in the first use of illicit drugs. BUT, does not include any activity designed to determine if a person is in need of treatment. It is limited to assess whether their behavior can be reversed through education.
  - CSAP's Minimum Data Set defines *Prevention Assessment and Referral Services* as "those activities intended to **provide risk screening, assessment, and referral** to prevention service populations for placement in prevention or **other appropriate services**." This alters the stated meaning of primary prevention if the "assessment" is a clinician's diagnosis and "placement in ...other appropriate services" is into treatment.

Also, the stated action of “placement in prevention” is a concept that needs clarification; primary prevention is for persons not engaged in use, so when is someone “placed in” prevention?

**2. Am I required to complete all seven forms? How do I know which of the forms to complete and submit to my county?**

- PADS is a reporting tool for primary prevention services purchased by ADP with SAPT block grant monies. These monies are distributed from ADP to the counties through NNA contracts. The county specifies in the NNA contract which of their providers will deliver any combination of the six primary prevention strategies. It is the county’s responsibility to inform their providers as to which strategies they are to deliver.

Providers must always complete ADP 7235A, *Program Description*, and then only forms ADP 7235B–G corresponding with the county contracted strategies. If a provider has delivered services using NNA funds within a strategy other than what they were contracted for, please fill out the corresponding strategy form(s) and include them with your submission to your county contact.

**3. Small Boxes ☐.**

- Small boxes appear throughout the forms. These are check mark boxes only. Do not put in numbers or information (e.g., *Accessibility*, *Service Populations* and *Where Services Occurred*).

**4. These forms are very redundant. For example, the category of *Service Populations* is on every form. Why can’t you cut down on the number of pages by marking all *Service Populations* once on a single page?**

- For reporting purposes, we must be able to determine *Service Populations*, *Where Services Occurred* and the *Race/Ethnicity*, *Age*, and *Gender* demographics for each unique strategy. If these sections appeared only once, it would commingle data for all the strategies. This would make it impossible to determine which population was served by which strategy.

**5. One of our prevention providers has three separate subcontracts for three separate services. How do we count this? ADP will be confused when they get three separate sets of forms for this one provider identification number.**

- The county is to submit **one set** of PADS forms for each primary prevention provider identification number at the end of the fiscal year. If the county has separate contracts with providers, but budgets under one provider number, then the **county/provider will need to combine all the data** collected into **one set** of PADS forms for that provider number before submitting it to ADP. If more than one set of PADS forms is received for a primary prevention provider funded in the annual NNA Contract, the forms will be returned to the county for compilation.

**6. I am the county contact for PADS and am responsible for sending the PADS forms to ADP at the end of the fiscal year. If I don’t have all the sets of forms from all of our providers at**



**the end of the fiscal year, should I send what I have or wait until I receive all the sets of forms?**

- We have found that late data from a few providers can delay an entire county's submission if multiple providers are involved. Therefore, we request that the county PADS contact submit completed fiscal year end forms for individual providers. This will expedite data entry, aid in early identification of errors and missing data, and allow for more timely year-end reports.

Prior to submitting forms for an individual provider, the county PADS contact must review them to determine if they are complete and accurate. Complete means form ADP 7235A and the specific strategy form(s) (ADP 7235B–G) that reflect the contracted services they provided. A partial submission for a provider will be returned to the county for completion.

**7. On forms ADP 7235B–F in Section C, *Service Delivered*, do the totals for C2, C3, and C4 have to match each other and the *Number Served* in C1?**

- Yes. All three total boxes should match the *Number Served*, if they do not balance it will trigger an internal database edit check. To avoid time spent correcting this error, always double check that these numbers balance before submitting the forms.

**8. If, in Section B, *Service Populations* of forms ADP 7235B–F, and ADP 7235G, Section B4, you have one person who falls into three service populations, how do you identify? For example, the person might be a child of a substance abuser, be economically disadvantaged, and have physical disabilities.**

- You would check all boxes that apply to an individual; in this case, three separate boxes. The purpose of *Service Populations*, is to document the range of individuals or populations that are served by one or more of your prevention strategies. This section does not define the number of individuals, and, therefore, indicates that an individual who has multiple factors will not represent a duplication of counts.

**9. Is there a statute or regulation that requires counties to respond to these data collection forms?**

- California Law (Health and Safety Code Section 11755(o)(1, 2, & 9) and (p) and Section 11758.29(e)) requires providers of publicly funded services or services licensed by ADP to report data to the state in a manner prescribed by ADP. In addition, each county's NNA Contract requires that the county submit PADS forms as a condition of their contract agreement.

**10. I am a county prevention contact and I have a provider who only delivered primary prevention services for a portion of the fiscal year. Do PADS forms have to be submitted for that provider?**

Yes. We have encountered the following situations where a provider delivered services for only a portion of the fiscal year:

- A provider was contracted for primary prevention at the beginning of the fiscal year and subsequently was terminated, ended the contract mid year, or ceased operating.

- A provider was added on during the fiscal year.

If the county contracted with a provider during a reporting fiscal year and the provider expended **any** ADP primary prevention fund monies within that year, the county is obligated to submit a set of PADS forms for that provider.

**11. What if one of our providers is also involved with treatment services? Do we count the services in this primary prevention survey?**

- You would not count the treatment services on the PADS forms (e.g., relapse prevention, aftercare, and secondary prevention are not covered by primary prevention funds). If a provider is identified in the NNA contract as receiving funds for primary prevention services (Service Codes 12 –17), the services/activities provided under those service codes would be reported on the PADS forms.

**12. Frequency.** The primary objective for counting *Frequency* is to document the number of times that a distinct prevention strategy activity (service/event) was provided. *Frequency* count cannot and does not weigh differences such as how long an activity lasted, the quality/value of an activity, or the degree to which an activity affected those exposed to it. *Frequency* can be viewed as counting the “doses” of prevention during the reporting period.

The determination of “number of times” is not always straightforward. To optimize PADS value locally, consistency within a county is important. The objective of counting *Frequency* is to document the volume, or amount, of different kinds of prevention activities being delivered. To count *Frequency* in a way that avoids large error, and is simple to implement, count each time or date a service is provided as a count of “1.” For example:

- a one-day event would have a *Frequency* of “1”
- a consecutive three-day conference/training would have a *Frequency* of “1”
- a program with non-consecutive sessions, once a week for ten weeks, would receive a *Frequency* of “10”;
- with multiple newsletters, you would count the number of times the newsletter was distributed

**13. Counting Participants.** The primary objective for counting the *Number Served* is to show how many participants attended an event. A specific person will be counted multiple times in a fiscal year if s/he receives multiple “doses” of prevention by attending several different prevention events, or at a single event that involves multiple CSAP strategies. The goal of PADS is to get an accurate count of individuals impacted and/or serviced by the various prevention efforts undertaken in a community. The difficulty for many providers has been in determining this count of individuals. Some general rules and examples follow in questions 15 – 18. It is acceptable to provide “best estimates” as long as the estimation process is done consistently.

**14. Attempt to get an unduplicated count of participants per activity.** Some examples of counting participants follow:

- **Is it okay to count an individual more than once if s/he is in multiple prevention events and/or different strategies during the fiscal year?**

Yes. Over the course of a year, it is possible that the same individual might be exposed to multiple events/strategies. For example, one individual received a health newsletter distributed by a service provider (Information Dissemination), used an employee assistance program (Problem Identification and Referral), and attended a small group session (Education). This person will be counted on three separate strategy forms.

- **How do I count individuals if they are participating in a consecutive three-day conference/training with the same people? Do we re-count the participants on each of the three separate days?**

No. If 150 individuals attended the three-day session, the *Number Served* would reflect 150, not  $3 \times 150 = 450$ . This would be considered a consecutive prevention service. For purposes of documenting the *Frequency* of the activity, it would be noted as “1” (refer to question 13).

- **If you conduct a program that consists of 10 non-consecutive days with the same 10 participants, do you multiply  $10 \times 10$  to equal a *Number Served* of 100 participants?**

No. You do not multiply the participants by the number of events. If this service is delivered on non-consecutive days over a specified period of time, with the same participants, the frequency would be a count of 10 events with a participant count of 10, not 100.

Note: If there were fluctuations in attendance for each of the sessions, count the total number of unique participants who attended the sessions. For example, if 10 people showed up at the first session, and 12 showed up at the second session (8 of the initial participants and 4 new participants), then the count would be 14 unique participants. The purpose is to document outreach, not to engage in duplicate counts of participants.

- **If you have a core group of 10 youth who attend every meeting, plus about 15 youth who attend intermittently, what number of youth do you report?**

The response to this question is very similar to the example and response provided in the previous question. For example, if these youth attended regularly scheduled activities on non-consecutive days, this would be considered a recurring prevention service. The *Frequency* for each activity would be reported separately. The count in this case would document 25 unique participants as the *Number Served*.

A good example is the Friday Night Live (FNL) programs. The FNL programs operate at the Chapter level in counties throughout the state. A Chapter may have 10 to 15 members involved in weekly meetings, typically over the course of a school year. We would not want to identify this as a *Frequency* of just one event for the whole year. Rather we would ask the provider, “Approximately how many sessions did these youth attend?” This approximate number would be the *Frequency*.

- **Three service providers in my county collaborated on a major media event. This was a one-time event that impacted approximately 600 people. In order for each of these providers to get credit for the work they did, how would you report the *Frequency* and count the *Number Served* for this activity?**

Because this was a collaborative effort in which each service provider developed distinct, separate sections of the media event, each provider should be allowed to count the *Frequency* as “1” event. PADS does not require that the *Number Served* be reported for media campaigns.

**15. Can I count one activity across strategies?**

- No. If the same activity is counted across strategies, you will create a misinterpretation as to the overall level of efforts currently provided in your county. Make your best determination as to which strategy the activity falls into. For example, if brochures/pamphlets (Information Dissemination Strategy) were distributed at a classroom education service (Education Strategy), you would not count this activity in both strategies. This activity would best be counted once in the Education Strategy, because the brochures/pamphlets distributed were part of an education service.

However, the following is an example of an “apparent” single activity which actually does involve more than one strategy: You visit a school to conduct a classroom education service (Education Strategy). Then, while at the school, you pass out brochures (Information Dissemination Strategy) to other students. The number of students receiving the classroom education service would be entered on Education Strategy under *(b) Classroom Educational Services*; the number of brochures passed out to additional students would be entered on Information Dissemination under *(a) Brochures/Pamphlets Disseminated*.

**16. Can I count a single activity as more than one service within a strategy?**

- No. We are striving for unduplicated counts. For example, you conduct a FNL activity. This feasibly could relate to more than one service within the Alternative Strategy form; e.g., *(a) Alcohol/Tobacco/Drug-Free Social/Recreation Events*, *(e) Friday Night Live (FNL)/Club Live/FNL Kids*, or *(g) Recreational Activities*. You must choose the single most appropriate service that relates to that activity within that strategy. Do not attempt to place a single activity within more than one service, that would over count the service occurrences and the *Number Served*.

**17. How do I complete the *Actual* and *Estimated* column in Section C1, *Services Requiring Demographics*, when some of the numbers of persons served were actual counts and some were estimated?**

- You would choose *Estimated* because not all persons served were known specifically.

**18. Demographics**

- The optional individual event worksheets may be used to record demographics as the services are delivered.
- In Section C1, *Services Requiring Demographics*, enter the number of persons served in the *Number Served* column. Enter A or E in the *Actual/Estimated* column. For C2 *Race/Ethnicity*, C3 *Age* and C4 *Gender* enter in the demographic breakdown; the *Totals* for each section should match the *Number Served* in C1.

The reverse side of each of the ADP 7235B-G forms repeats the following information on optional subcategories for some of the *Race/Ethnicity* categories: Optional subcategories for:

- Native American/Alaska Native are Multitribal Affiliation and Other Native American;
- Asian or Pacific Islander are Japanese, Okinawan, Korean, Filipino, Chinese, Mixed-Part Hawaiian, Vietnamese, Cambodian, Native Hawaiian, Samoan, and Other Asian or Pacific Islander;
- Hispanic/Latino are Puerto Rican, Mexican, Cuban, and Other Hispanic/Latino.

**19. County/provider program staff, who are funded with NNA primary prevention dollars, attend conferences, trainings, etc. regarding AOD prevention. How is this accounted for in PADS?**

- It is not. PADS is a collection of services delivered, not received. This would be considered an administrative expense. It is understood that there are administrative expenses involved in the delivery of primary prevention services.

**20. Where do 12 step programs such as Alcoholics Anonymous, Narcotics Anonymous, etc. fit into PADS?**

- The only 12 step program services allowed using the NNA primary prevention funds are Children of Substance Abusers (COSA) Groups or Adult Children of Alcoholics (ACOA). These would be accounted for in the Education Strategy.

Obviously, the examples above do not cover all questions or possible scenarios. In the subsequent sections, additional examples and questions are included as they relate to the specific 7235 form.

At the end of each strategy section, worksheets are included to assist service providers in completing the ADP 7235 forms. **These worksheets are NOT REQUIRED**, they are offered simply as potential aids to individuals charged with the responsibility of completing the forms. The worksheets share one characteristic in common with the Federal MDS; that is, they indicate the individual prevention event/activity and collect participant information (e.g., service populations, specifics of the service, frequency, and participant information) for each prevention activity. This may seem to be labor intensive, but the form, in fact, can be completed fairly quickly if done near the time of the scheduled event/activity. Because it is the counties' responsibility to ensure that valid data is being sent to ADP, the use of the worksheets may facilitate this outcome.



## SECTION 2

### PROGRAM DESCRIPTION – ADP 7235A

The Program Description ADP 7235A is the “cover form” that is required with every PADS submission. It includes basic provider information that is needed for ADP to process the submission. If not included, ADP will return the PADS package to the county for completion. The ADP 7235A form contains two sections: *Section A – County/Provider Information* and *Section B – Program Information*. A copy of ADP 7235A can be referenced on page 15. The following points supplement the basic completion instructions that are printed on the reverse side of the form.

#### Section A. County/Provider Information

Section A1 – A9 require basic identification information (*county name, provider name, provider identification number, contact information and submission type*). Key to completing this section is the inclusion of an accurate *Provider ID Number* in No. 3. The *Provider ID Number* is critical because it links the provider with ADP’s Master Provider File (MPF), NNA contract, budget and cost report information. If this number is missing or inaccurate, the provider will not be recognized as delivering primary prevention and data cannot be entered into the system; the forms will be returned to the county.

Section A10 requests provider contract information.

Section A11 requests the date.

#### Section B. Program Information

Section B1, *Program Status*. Check the appropriate box. If the program began prior to or during the reporting year, check the *New Program* box and enter the *Start Date* in the space provided.

Section B2, *Program Description*. Provide a brief description of the program. A separate piece of paper may be attached. This information will assist ADP in preparing the application for the SAPT block grant.

Section B3, *Strategies Delivered* are the six primary prevention CSAP strategies identified in the SAPT block grant on which ADP is required to report. Please see the reverse side of the form for a definition of each strategy. Counties are advised to assure that their primary prevention providers are delivering, at the minimum, the strategies that were purchased through the ADP NNA contract. A service provider must identify at least one of the strategies and complete the corresponding ADP 7235B-G form. If this section is not completed, the submission for that service provider will be returned to the county.

Section B4, *ADP Negotiated Net Amount Contract Prevention Elements*. Acceptance and use of NNA funds requires that counties meet specified CSAP research-based prevention concepts and U.S. Department of Education principles of effectiveness grant requirements. ADP has incorporated these requirements into five prevention elements. Providers are to indicate whether or not they are currently using each of the elements.

Section B5, *Accessibility*. The county is required to assess, monitor and document each subcontractor's compliance with the Rehabilitation Act of 1973 and Americans with Disabilities Act of 1990 to ensure that recipients/beneficiaries of services are provided services without regard to physical or mental disability. This section simply requires checks in the appropriate boxes.

## QUESTIONS

The following questions were asked by county personnel and/or service providers when completing the ADP 7235A form:

**1. I do not know my *Provider ID Number*. How do I find out what my number is?**

- Your county alcohol and drug program administration will have this information. If a provider does not have an individual number assigned by ADP, the county administrator may wish to contact ADP to obtain a *Provider ID Number*.

The *Provider ID Number* is a six-digit number assigned by ADP. The first two digits contain the county code number for the county in which the provider is located (e.g., Alameda County = 01). The next four digits contain the individual provider number assigned by ADP.





## PROGRAM DESCRIPTION – ADP 7235A

(To view the ADP 7235A form, click on Forms as listed on the PADS introductory page)

## PROGRAM DESCRIPTION – ADP 7235A

(To view the ADP 7235A form, click on Forms as listed on the PADS introductory page)

## SECTION 3

### INFORMATION DISSEMINATION STRATEGY – ADP 7235B

*This strategy provides awareness and knowledge of the nature and extent of alcohol, tobacco, and drug use, abuse, and addiction and the effects on individuals, families, and communities . . . (and) . . . increases knowledge and provides awareness of available prevention programs and services.*

Federal Register, 58:60  
March 31, 1993

The Center for Substance Abuse Prevention (CSAP) characterizes information dissemination as “one-way” communication from the source to the audience. A message is delivered, but there is little opportunity for an exchange of information with those who receive the message. Examples of this strategy include print and electronic media, speaking engagements, resource directories, clearinghouses, or health fairs/promotions.

The purpose of ADP 7235B is to document the use of the Information Dissemination Strategy as part of a county’s overall prevention plan. Most of the approaches are well known, and documentation of the information dissemination services posed few problems for counties. As in all the ADP 7235B-F forms, the Information Dissemination Strategy, ADP 7235B form, includes four sections: Section *A – Provider/Program Information*; Section *B – Service Populations*; Section *C – Service Delivered*; and Section *D – Where Services Occurred*. A copy of ADP 7235B can be referenced on page 29. The following information supplements the basic completion instructions that are printed on the reverse side of the form.

#### **Section A . Provider/Program Information**

Section A1 – A5 require basic identification information (*county name, provider identification number, provider name, and contact information*). This information should be identical to that provided on ADP 7235A. This information is necessary should the series of forms become separated.

#### **Section B. Service Populations**

*Service Populations* provides a listing of potential populations that can be served by this strategy. The *Service Populations* section is identical on ADP 7235B-F. In recording service populations, a provider selects the category that most closely describes the groups or individuals who are the recipients of the prevention service. If a provider identifies that they are serving a majority of the populations listed, it would be best to choose (*k*) *General Population* rather than checking multiple boxes. See Appendix A for definitions of service populations.

#### **Section C. Service Delivered**

Section C1 lists *Services Requiring Demographics*. For each service delivered, the provider should enter the number of times the service was provided in the *Frequency* column and then enter the

*Number Served.* Identify if the *Number Served* is actual or estimated by entering an A or E in the designated column.

Sections C2 *Race/Ethnicity*, C3 *Age*, and C4 *Gender* directly link the participants with the services delivered. Enter the demographic breakdown; the *Totals* for each section should match the *Number Served* in C1. See the back of the form for more detailed demographic information.

Section C5 lists *Services Not Requiring Demographics*. For each service delivered, enter the number of times the activity took place in the *Frequency* column.

## Section D. Where Services Occurred

This is a list of locations where services might occur. The provider is required to select the location(s) that most closely describe where the services occurred. A new location has been added; (d) *County/Provider Office*.

## QUESTIONS

The following questions were asked by county personnel and prevention providers when completing Form ADP 7235B:

1. **It is not clear to me how you would determine what activities would be included for some of the services in Section C1 and C5. Please provide definitions for the following:** (Some of the following definitions are provided by CSAP.)
  - Clearinghouse/Information Resource Centers: A central repository of and dissemination point for current, factual, and culturally relevant written and audiovisual information and materials concerning substance use and abuse. Examples are: information resource centers, resource libraries, electronic bulletin boards, prevention resource centers, Regional Alcohol and Drug Awareness Resource (RADAR) network centers. According to CSAP, a clearinghouse/information resource center is **counted only once during the reporting period** for the year. Demographic tracking is not applicable.
  - Conferences/Fairs: A gathering to discuss matters of common concern, or a gathering of buyers, sellers, and competitive exhibitions with accompanying entertainment and amusements. These events may be general in nature and may not necessarily be school- or prevention-based activities; however, they offer the opportunity to disseminate materials and information intended to educate individuals, schools, families, and communities about specific substance abuse and health-related risks, risk reduction activities, and other activities to promote positive and healthy lifestyles. Examples are: presentations at conferences, or booths or tables set up to display informational materials at county/state fairs, etc.
  - Health Fair/Promotions: A school- or community-focused gathering or a wide array of services and methods to disseminate materials and information intended to educate individuals, schools, families, and communities about specific substance abuse and health-related risks, risk reduction activities, and other activities to promote positive and healthy lifestyles. Examples are: school health promotion gatherings, health screening programs in shopping malls, church fairs or carnivals, and public health or health education fairs where health education materials, screening services and the showing of substance abuse prevention videotapes are available.

- Materials Development: The creation of original documents and other educational materials for use in information dissemination activities related to substance abuse and its effects on individuals, schools, families, and communities. Included are:
  - Audiovisual Material - prevention material involving both hearing and sight; e.g., videotapes and films.
  - Brochures/Pamphlets – unbound written material containing program, service and/or subject information. Brochures/pamphlets are not included in the printed material category below because the SAPT block grant application specifically counts brochures.
  - Printed Material - written materials designed to inform individuals, schools, families, and communities about the effects of substance abuse and available prevention approaches and services; e.g., flyers, fact sheets, posters, prevention plans.
  - Curriculum - a course of study in prevention.
  - Newsletter - a report giving prevention news or information of interest to a particular group. Electronic newsletters, e-mail, and broadcast faxes may be included.
  - Public Service Announcements (PSAs) - a media message, or campaign, usually less than five minutes long, broadcast at no charge, that is designed to inform and educate audiences concerning substance abuse and its effects on individuals, schools, families, and communities; e.g., television PSAs, radio PSAs, no charge newspaper advertisements and announcements.
  - Resource Directories – a list of substance abuse and related programs and services in a particular community, county, or state.
- Materials Dissemination: Distribution of the written and audiovisual prevention information as listed above in the Materials Development category. Examples are: providing handouts for a speaking engagement or providing materials for health fairs.
- Media Campaigns: Structured activities that use print and broadcast media to deliver prevention information or health promotion messages relative to substance abuse. In contrast to PSAs, campaign messages are usually more than five minutes long. Examples are: media promotion of Red Ribbon, Project Graduation, or other similar events, printing of ads with “no-use” messages, distribution of signs to stores and businesses, distribution of bumper stickers, posters, etc., use of national substance abuse prevention media materials tailored to the state or community (Partnership for a Drug-Free America).
- Speaking Engagements: A wide range of prevention activities intended to convey information about substance abuse issues to general and/or specific audiences. Examples are: speeches, talks, news conferences, briefings, one-time classroom presentations, one-time assembly presentations, hearings, volunteer speakers bureaus.
- Telephone Information Services: Telephone services intended to provide information about substance abuse prevention and treatment issues and services. Examples are: toll-free telephone number services, information and referral lines, hotlines, crisis lines.
- Web Sites: A provider operated web site used to deliver prevention information, education, and/or materials. The appropriate way to count this is to simply document the number of web sites operating during the reporting year.

**2. How do you count the *Number Served* when sending out multiple mailings of brochures, pamphlets, or newsletters to the same recipients through out the year? Examples: list serves, committees, membership lists, etc...**

- As stated in Section 1 – *General Procedures and Questions*, avoid duplicate counts of participants. When disseminating information to the same groups of participants throughout the year, document how many times the information was sent out in the *Frequency* column.

However, do not repeatedly count the same recipients with each mailing. For example: A newsletter is disseminated to the same 20 committee members 12 times per year. Enter a count of 12 for the *Frequency* and 20 for the *Number Served*, not  $12 \times 20 = 240$ .

**3. How do you determine the participant demographics (*Race/Ethnicity, Age and Gender*) when you are distributing material/information on a mass scale?**

- Providers should make their best estimates based on the populations receiving the services. Some counties have found that their local census data is the best source for a demographic breakdown of their service audience. The services that were the most difficult to identify recipients have been separated into *Section C5 – Services Not Requiring Demographics*, which only requests *Frequency* data.

**4. Why is the service of *Brochures/Pamphlets Disseminated* not included in the *Printed Materials Disseminated* category? Why is it listed separately?**

- The SAPT block grant application lists brochures as a separate reporting item. If (a) *Brochures/Pamphlets Disseminated* were combined with (r) *Printed Materials Disseminated*, it would be impossible to separate them out from other printed materials (e.g., flyers, fact sheets, posters, etc.).

**5. We set up a booth at a Conference and had 500 copies of five different brochures available. At the end of the day, all of the brochures were gone. How do we count the *Number Served*? Can we account for this activity as both (a) *Brochures/Pamphlets Disseminated* and (b) *Conference/Fairs*?**

- Although there were 2,500 brochures disseminated, it is very likely that less than 2,500 persons were served since many of the participants will pick up more than one brochure. A provider must make their best estimate as to how many actual persons were served and their demographics.

To avoid duplicate counts of participants, the provider must determine the “single” most appropriate service description for that activity. In this case, the primary activity was a (b) *Conference/Fair* where brochures happened to be disseminated. Do not also document the information under (a) *Brochures/Pamphlets Disseminated*, this will produce a duplicate count.

**6. How do we count *Frequency* for (e) *Clearinghouse/Info Resource Centers in Operation*?**

- Note how many are operating, not how many days in operation or the number of visitors.

**7. A provider developed a packet of printed materials and mailed it to 900 schools. How would this be counted?**

- Account for the development of the packet of printed materials under C5 - *Services Not Requiring Demographics*, item (q) *Printed Materials Developed* as a “1” in the *Frequency* column. Account for the number of packets sent out under (r) *Printed Materials Disseminated* as a “900” in the *Frequency* column.

## WORKSHEETS

Several optional data collection worksheets have been developed to assist counties and service providers collect and aggregate the information required in ADP 7235B-G. **These worksheets are not required and are not to be submitted to ADP.**

### Worksheet B1 – Product(s)/Service(s) Dissemination Tracking

The purpose of Worksheet B1 is to provide a tool to document the dissemination of products and/or services either developed or supplied by a service provider. The worksheet includes a number of separate data elements that specifically respond to the informational items included on the ADP 7235B form.

- Service Provider. Enter the name or identification of the service provider.
  - Date. Enter the date that the form is completed.
  - Period of Performance. Note the actual period of time covered by this worksheet. Some service providers may want to tally their efforts monthly. Those that make less use of this strategy might document their efforts over a longer period of time (e.g., a quarter or even a year's worth of information on one worksheet). The important factor is to document the event as close to the service date as possible to ensure an accurate capture of data.
  - Worksheet Preparer. Enter the individual/agency responsible for completing the worksheet.
1. (Column 1) Product(s)/Service(s). While the ADP 7235B form does not ask for the specific title or topic of the product/service being disseminated, local agencies may want to document the type of product/service by name on the worksheet to facilitate a more accurate tracking of the service.
  2. (Column 2) Development Date. Indicate the date that the product/service was developed. Some products/services will require a substantial development period before release. e.g., *(n) Media Campaigns Developed*, *(q) Printed Materials Developed*, *(s) Public Service Announcements Developed*, and *(u) Resource Directories Developed*.
  3. (Column 3) Service Delivered. Indicate the service delivered from Section C1 or C5. This is important for determining the potential audience for the materials.
  4. (Column 4) Dissemination Date. Document the frequency of the dissemination effort. Was it a one-time mass mailing? Was it a PSA repeated 15 times over a two-month period? This information is required on the ADP 7235B form in the *Frequency* column, and this worksheet will help facilitate an accurate response to this item. This information may also be helpful in determining the potential audiences' impact.
  5. (Column 5) Number Served. Document the persons served and whether that audience is an estimated or actual count. Worksheet B1 tracking of each individual dissemination effort should facilitate the determination of the *Number Served* requirement of the ADP 7235B form.
  6. (Column 6) Subtotals. Enter subtotals if applicable.

### Worksheet B2 – Service Population and Service Location

Worksheet B2 captures general information concerning the service population and service location. Completion of this worksheet facilitates responses to ADP 7235B, Section B, *Service Populations*, and Section D, *Where Services Occurred*. This worksheet contains three columns and tracks an individual product/service much like the process used in Worksheet B1.

1. (Column 1) Product(s)/Service(s). Carry over the product/service from Worksheet B1.



2. (Column 2) Service Populations. Indicate the service populations receiving services. Using the alpha code designation listed on ADP 7235B, Section B (e.g., (a) *Business and Industry*, (b) *Children of Substance Abusers*, etc.).
3. (Column 3) Where Services Occurred. Indicate where the product/service was provided. Using the alpha code designation of the service locations listed on ADP 7235B, Section D (e.g., (a) *Alternative Schools*, (b) *Community At Large*, etc.).

### **Worksheet B3 – Participant Demographics**

Worksheet B3 was developed to assist service providers/agencies in responding to ADP 7235B, Section C2 *Race/Ethnicity*, C3 *Age* and C4 *Gender*. The procedure for completing this worksheet follows the structure and format of the other two worksheets. Worksheet B3 requires a listing of each of the product(s)/services(s) and the documentation of the demographics of the service recipients. It is anticipated that estimates for some products/services will be used. The following are some guidelines to ensure that appropriate procedures are used:

1. Numbers are required. Do not use percentages.
2. Estimates are acceptable. Given the difficulty in determining potential audience size, estimates may be the only way to provide these numbers.
3. The *Number Served* or impacted by the product/service was already provided in Section C1, *Services Requiring Demographics*. The combined total in that section should equal the *Totals* in each of the subsections of C2, C3, and C4.
4. General population demographics for census tract information was cited as a source of use by some of the service providers who completed the initial set of ADP 7235 forms.



## Worksheet B1

### Product(s)/Service(s) Dissemination Tracking

**Information Dissemination Strategy**

ADP 7235B

Prevention Activities Data System (PADS)

Service Provider: \_\_\_\_\_

Date: \_\_\_\_\_

Period of Performance \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_

Preparer: \_\_\_\_\_

1. Information Dissemination Product(s)/Services(s)	2. Development Date	3. Services Delivered (e.g., Brochures, Printed Materials, PSAs)	4. Dissemination Date Actual Dates/No. of Times Distributed or Presented	5. Number Served Estimated or Actual (A or E)	6. Subtotals



## Worksheet B2

### Service Population And Service Location

#### Information Dissemination Strategy

ADP 7235B

Prevention Activities Data System (PADS)

Service Provider: \_\_\_\_\_

Date: \_\_\_\_\_

Period of Performance \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_

Preparer: \_\_\_\_\_

1. Information Dissemination Product(s)/Services(s)	2. Service Populations Use Codes Listed on Backside of Worksheet	3. Where Service Occurred Use Codes Listed on Backside of Worksheet

## **Service Population Codes**

- |  |   |
|--|---|
| (a) Business and Industry                | (gg) Religious Groups                   |
| (b) Children of Substance Abusers*       | (hh) Retailers                          |
| (c) Civic Groups/Coalitions              | (ii) Runaway/Homeless Youth*            |
| (d) College Students                     | (jj) School Dropouts*                   |
| (e) Delinquent/Violent Youth*            | (kk) Social Service Provider            |
| (f) Economically Disadvantaged*          | (ll) Teachers/Administrators/Counselors |
| (g) Elementary School Students           | (mm) Voluntary/Fraternal Community Svc. |
| (h) Employee Groups/Unions               | (nn) Women and Children                 |
| (i) Fire Professionals                   | (oo) Youth/Minors                       |
| (j) Gangs                                | (pp) Other                              |
| (k) General Population                   |   |
| (l) Government/Elected Officials         |   |
| (m) Health Professionals                 |   |
| (n) High School Students                 |   |
| (o) HIV Infected Persons                 |   |
| (p) Homeowners Associations              |   |
| (q) IV Drug Users                        |   |
| (r) Law Enforcement/Military             |   |
| (s) Lesbian/Gay/Bisexual/Transgender     |   |
| (t) Local Municipal Agencies             |   |
| (u) Middle/Jr High School Students       |   |
| (v) Neighborhood Associations            |   |
| (w) Older Adults                         |   |
| (x) Parents/Families                     |   |
| (y) People w/ Mental Health Problems*    |   |
| (z) Persons Using Substances*            |   |
| (aa) Persons With Physical Disabilities* |   |
| (bb) Physical/Emotional Abuse Victims    |   |
| (cc) Pregnant Women/Teens*               |   |
| (dd) Preschool Students                  |   |
| (ee) Prevention/Treatment Professionals  |   |
| (ff) Professional/Trade Associations     |   |

## **Where Services Occurred Codes**

- (a) Alternative Schools
- (b) Community At Large
- (c) Community Center
- (d) County/Provider Staff
- (e) Criminal Justice System
- (f) Faith Center
- (g) Health Center/Clinic
- (h) Hospital
- (i) Parks/Recreation
- (j) Public Housing
- (k) Residential Treatment
- (l) School
- (m) Street Outreach
- (n) Transitional Housing
- (o) Treatment Facility
- (p) University/College
- (q) Work Place
- (r) Youth Clubs/Center
- (s) Other

## Worksheet B3 Participant Characteristics

### Information Dissemination Strategy

ADP 7235B

Prevention Activities Data System (PADS)

Service Provider: \_\_\_\_\_

Date: \_\_\_\_\_

Period of Performance \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_

Preparer: \_\_\_\_\_

1. Information Dissemination Product(s)/Services(s)	2. Race/Ethnicity Use Codes Listed on Backside of Worksheet	3. Age (Years) Use Codes Listed on Backside of Worksheet	4. Gender	5. Subtotal

### **Race/Ethnicity Codes**

- (a) White, Not Hispanic
- (b) Asian or Pacific Islander
- (c) Hispanic/Latino
- (d) Native American/Alaska Native
- (e) African American
- (f) Multiracial/Multiethnic
- (g) Other

### **Age Codes**

- (a) Under 5
- (b) 5-9
- (c) 10-12
- (d) 13-15
- (e) 16-18
- (f) 19-25
- (g) 26-55
- (h) Over 55

### **Gender Codes**

- M = Male
- F = Female
- O = Other



INFORMATION DISSEMINATION STRATEGY– ADP 7235B  
(To view the ADP 7235B form, click on Forms as listed on the PADS introductory page)

INFORMATION DISSEMINATION STRATEGY– ADP 7235B  
(To view the ADP 7235B form, click on Forms as listed on the PADS introductory page)

## SECTION 4

### EDUCATION STRATEGY – ADP 7235C

*This strategy involves two-way communication and is distinguished from the Information Dissemination Strategy by the fact that interaction between the educator/facilitator and the participants is the basis of its activities.*

Federal Register, 58: 60  
March 31, 1993

The Education Strategy has two basic characteristics that distinguish it from other prevention efforts. First, the strategy depends on the *interaction* between an *instructor and/or facilitator* and an *audience*. Second, the services under this strategy aim to “*improve critical life and social skills,*” which includes “*decision making, refusal skills, critical analysis, and systematic judgment abilities.*” Approaches used in this strategy involve some form of a teaching to enhance individual efforts to remain alcohol, tobacco, and drug free. However, this transference of information does not need to be conducted by teaching or in an educational setting.

The purpose of ADP 7235C is to document the use of the Education Strategy as part of a county’s overall prevention plan. Most of the approaches are well known, and documentation of the education services posed few problems for counties. As in all the ADP 7235B-F forms, the Education Strategy, ADP 7235C form, includes four sections: *Section A – Provider/Program Information*; *Section B – Service Populations*; *Section C – Service Delivered*; and *Section D – Where Services Occurred*. A copy of ADP 7235C can be referenced on page 41. The following information supplements the basic completion instructions that are printed on the reverse side of the form.

#### **Section A . Provider/Program Information**

Section A1 – A5 require basic identification information (*county name, provider name, provider identification number, and contact information*). This information should be identical to that provided on ADP 7235A. This information is necessary should the series of forms become separated.

#### **Section B. Service Populations**

*Service Populations* provides a listing of potential populations that can be served by this strategy. The *Service Populations* section is identical on ADP 7235B-F. In recording service populations, a provider selects the category that most closely describes the groups or individuals who are the recipients of the prevention service. If a provider identifies that they are serving a majority of the populations listed, it would be best to choose (*k*) *General Population* rather than checking multiple boxes. See Appendix A for definitions of service populations.

#### **Section C. Service Delivered**

Section C1 lists *Services Requiring Demographics*. For each service delivered, the provider should enter the number of times the service was provided in the *Frequency* column and then enter the *Number Served*. Identify if the *Number Served* is actual or estimated by entering an A or E in the designated column.

Sections C2 *Race/Ethnicity*, C3 *Age*, and C4 *Gender* directly link the participants with the services delivered. Enter the demographic breakdown; the *Totals* for each section should match the *Number Served* in C1. See the back of the form for more detailed demographic information.

## Section D. Where Services Occurred

This is a list of locations where services might occur. The provider is required to select the location(s) that most closely describe where the services occurred. A new location has been added; (d) *County/Provider Office*.

## QUESTIONS

The following questions were asked by county personnel and prevention providers when completing Form ADP 7235C:

1. **It is not clear to me how you would determine what activities would be included for some of the services in Section C. Please provide definitions for the following:** (Some of the following definitions are provided by CSAP.)
  - Children of Substance Abusers (COSA) Groups: Substance abuse prevention educational services targeted to youth and adults who are children of substance abusers. Examples are: COSA 12-step programs, short-term educational groups, risk and protective factor programs, Adult Children of Alcoholics (ACOA) meetings.
  - Classroom Educational Services: Prevention lessons, seminars, or workshops that are recurring and are presented primarily in a school or college classroom. Examples are: delivery of recognized prevention curricula, regular and recurring health education presentations to students.
  - Educational Services for Youth Groups: Structured substance abuse prevention lessons, seminars, or workshops directed to a variety of youth groups (children, teens, young adults) and youth organizations. Examples are: substance abuse education for youth groups such as Boys & Girls Clubs and Scouts, general substance abuse prevention education for other groups or organizations serving youth.
  - Mentoring: A relationship over a prolonged period of time between two or more people in which the older, wiser, more experienced individual(s) provides stable, as-needed support, guidance, and concrete help to the young, at-risk person(s).
  - Parenting/Family Management Services: Structured classes and programs intended to assist parents and families in addressing substance abuse risk factors, implementing protective factors, and learning about the effects of substance abuse on individuals and families. Topics typically include parenting skills, family communications, decision-making skills, conflict resolution, family substance abuse risk factors, family protective factors, and related topics. Examples are: parent effectiveness training, parenting and family management classes, prevention programs targeting the family, programs designed to strengthen families.
  - Peer Leader/Helper Programs: Structured, recurring prevention services that utilize peers (people of the same rank, ability, or standing) to provide guidance, support, and other risk reduction activities for youth or adults. Examples are: peer-resistance development, peer-cross-age tutoring programs, student nonusing groups (“Just Say No”), teen leadership institutes, peer support activities (clubs, church groups).

- Small Group Sessions: Provision of educational services to youth or adults in groups of not more than 30 members. Examples are: substance abuse education groups, short-term education groups, youth education groups, parent education groups, business education groups, church education groups.
2. **What is the difference between *Speaking Engagements* and a *Classroom Educational Service* presentation?**
- *Speaking Engagements* would be characterized as any **one-time** presentation to general and/or specific audiences. Examples would include: speeches, talks, news conferences, briefings, one-time classroom presentations, one-time assembly presentations, hearings, and volunteer speakers bureaus. This service would be part of the Information Dissemination Strategy. An Education Strategy, *Classroom Educational Service* presentation, would be characterized as prevention lessons, seminars, or workshops that are **recurring** and are presented interactively, primarily in a school or college classroom.
3. **Please discuss county FNL educational activities.**
- FNL appears as a service within three of the strategies (ADP 7235C, D, and F). It is important to count a FNL activity based on its strategic emphasis (e.g., are you capturing a FNL event as an Education, Alternative, or Community Strategy?). Do not double count a single activity across multiple strategy forms. You must decide what is the intent of the FNL activity and then record it on the single most appropriate strategy form.
4. **Please discuss *Mentoring* as an educational approach.**
- Although (e) *Mentoring* is included as an Education Strategy service, it may best be counted on the Alternative Strategy, ADP 7235D form, under (h) *Youth/Adult Leadership Activities*. The definition for *Youth/Adult Leadership Activities* is “Services through which youth/adult role models work with youth to help prevent substance abuse. Examples are: tutoring programs, coaching activities, adult mentoring programs, adult-led youth groups, and youth/peer mentoring programs.” *Mentoring* is defined as “a relationship over a prolonged period of time between two or more people in which the older, wiser, more experienced individual(s) provides stable, as-needed support, guidance, and concrete help to the young, at-risk person(s).”
5. **We have “Topical Seminars” once a month which would fall under the Education Strategy. Where would you count these activities?**
- It would depend on the topic and/or where the seminars were held. Four examples are:
    - (a) prevention lessons, seminars, or workshops that are recurring and are presented primarily in a school or college classroom, would be counted under (b) *Classroom Education Services*;
    - (b) structured classes and programs intended to assist parents and families in addressing substance abuse risk factors, implementing protective factors, and learning about the effects of substance abuse on individuals and families would be counted in (f) *Parenting/Family Management Services*;

(c) structured, recurring prevention services that utilize peers (people of the same rank, ability, or standing) to provide guidance, support and other risk reduction activities for youth or adults would be counted under (g) *Peer Leader/Helper Programs*; and  
(d) substance abuse prevention education services for youth and adults who are children of substance abusers would use (a) *Children of Substance Abusers Groups*. (examples are COSA 12-step programs; short-term education groups; risk or protective factor programs; and Adult Children of Alcoholics (ACOA) meetings).

**6. One of our providers supervises and arranges for probation youth to attend AA/NA meetings. These youth are not admitted to a clinic and are not required to attend these meetings. The provider provides outreach, education, etc., and encourages youth to take advantage of these “field trips.” Can these activities be counted in either the Education or Alternatives Strategies?**

- Because these youth are not in a treatment program, and the intent of this activity is education, your provider would count these activities in the Education Strategy under (i) *Small Group Sessions*.

**7. How are mandated drug education classes accounted for in PADS?**

- They are not. Mandated drug education classes are generally self-funded by the participants paying a fee to attend the class in lieu of prosecution. Only “primary prevention” activities delivered using SAPT NNA funds are accounted for on the PADS forms.

## **WORKSHEETS**

Several optional data collection worksheets have been developed to assist counties and service providers collect and aggregate the information required in ADP 7235B-G forms. **These worksheets are not required and are not to be submitted to ADP.**

### **Worksheet C1 – Service Population and Service Location**

The purpose of Worksheet C1 is to provide a tool to document information that corresponds with form ADP 7235C.

- Service Provider. Enter the name or identification of the service provider.
  - Date. Enter the date that the form is completed.
  - Period of Performance. Note the actual period of time covered by this worksheet. Some service providers may want to tally their efforts monthly. Those that make less use of this strategy might document their efforts over a longer period of time (e.g., a quarter or even a year’s worth of information on one worksheet). The important factor is to document the event as close to the service date as possible to ensure an accurate capture of data.
  - Worksheet Preparer. Enter the individual/agency responsible for completing the worksheet.
1. (Column 1) Educational Service(s). While ADP 7235C includes a number of educational approaches, many of the approaches are general and local agencies may want to document the type of service by name on the worksheet to facilitate a more accurate tracking of the services. A service provider could also use the alpha code designation of the services listed on ADP

7235C (e.g., (a) *Children of Substance Abusers Groups* or (b) *Classroom Educational Services*, etc.).

2. (Column 2) Frequency. Enter the frequency of the service activity. This information will help facilitate an accurate response on ADP 7235C, Section C1. This information may also be helpful in determining potential audiences' impact.
3. (Column 3) Number Served. Document the persons served and whether this is an estimated or actual count. This number should represent an unduplicated count of the individuals involved with each educational activity.
4. (Column 4) Service Population. Indicate the service populations receiving services. Using the alpha code designation listed on ADP 7235C, Section B (e.g., (a) *Business and Industry*, (b) *Children of Substance Abusers*, etc.).
5. (Column 5) Where Services Occurred. Indicate where the product/service was provided. Using the alpha code designation of the service locations listed on ADP 7235C, Section D (e.g., (a) *Alternative Schools*, (h) *Parks/Recreation*, etc.).

## **Worksheet C2 – Participant Demographics**

Worksheet C2 was developed to assist service providers/agencies in responding to ADP 7235C, Section C2 *Race/Ethnicity*, C3 *Age* and C4 *Gender*. The procedure for completing this worksheet follows the structure and format of Worksheet C1. Worksheet C2 requires a listing of each of the product(s)/services(s) and the documentation of the demographics of the service recipients. It is anticipated that estimates for some products/services will be used. The following are some guidelines to ensure that appropriate procedures are used:

1. Numbers are required. Do not use percentages.
2. Estimates are acceptable. Given the difficulty in determining potential audience size, estimates may be the only way to provide these numbers.
3. *Number Served* or impacted by the product/service was already provided in Section C1, *Services Requiring Demographics*. The combined total in that section should equal the Totals in each of the subsections of C2, C3, and C4.
4. General population demographics for census tract information was cited as a source of use by some of the service providers who completed the initial set of ADP 7235 forms.





## Worksheet C1

### Service Population And Service Location

#### Education Strategy

ADP 7235C

Prevention Activities Data System (PADS)

Service Provider: \_\_\_\_\_

Date: \_\_\_\_\_

Period of Performance \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_

Preparer: \_\_\_\_\_

1. Educational Services(s) Use Codes Listed on Backside of Worksheet	2. Frequency (No. of Times the Service was Provided)	3. Number Served & Estimated or Actual (A or E)	4. Service Population Use Codes Listed on Backside of Worksheet	5. Where Service Occurred Use Codes Listed on Backside of Worksheet

## Education Service Codes

- (a) Children of Substance Abusers Groups
- (b) Classroom Education Services
- (c) Educational Services for Youth Groups
- (d) Friday Night Live (FNL)/Club Live/FNL Kids
- (e) Mentoring
- (f) Parenting/Family Management Services
- (g) Peer Leader/Helper Program
- (h) Preschool ATOD Prevention Programs
- (i) Small Group Sessions
- (j) Theatrical Troupes
- (k) Other

## Service Population Codes

- (a) Business and Industry
- (b) Children of Substance Abusers\*
- (c) Civic Groups/Coalitions
- (d) College Students
- (e) Delinquent/Violent Youth\*
- (f) Economically Disadvantaged\*
- (g) Elementary School Students
- (h) Employee Groups/Unions
- (i) Fire Professionals
- (j) Gangs
- (k) General Population
- (l) Government/Elected Officials
- (m) Health Professionals
- (n) High School Students
- (o) HIV Infected Persons
- (p) Homeowners Associations
- (q) IV Drug Users
- (r) Law Enforcement/Military
- (s) Lesbian/Gay/Bisexual/Transgender
- (t) Local Municipal Agencies
- (u) Middle/Jr High School Students
- (v) Neighborhood Associations
- (w) Older Adults
- (x) Parents/Families
- (y) People With Mental Health Problems\*
- (z) Persons Using Substances\*
- (aa) Persons With Physical Disabilities\*
- (bb) Physical/Emotional Abuse Victims\*
- (cc) Pregnant Women/Teens\*
- (dd) Preschool Students
- (ee) Prevention/Treatment Professionals
- (ff) Professional/Trade Associations
- (gg) Religious Groups
- (hh) Retailers
- (ii) Runaway/Homeless Youth\*
- (jj) School Dropouts\*
- (kk) Social Service Provider
- (ll) Teachers/Administrators/Counselors
- (mm) Voluntary/Fraternal Community Service
- (nn) Women and Children
- (oo) Youth/Minors
- (pp) Other

## Where Service Occurred Codes

- (a) Alternative Schools
- (b) Community At Large
- (c) Community Center
- (d) County/Provider Office
- (e) Criminal Justice System
- (f) Faith Center
- (g) Health Center/Clinic
- (h) Hospital
- (i) Parks/Recreation
- (j) Public Housing
- (k) Residential Treatment
- (l) School
- (m) Street Outreach
- (n) Transitional Housing
- (o) Treatment Facility
- (p) University/College
- (q) Work Place
- (r) Youth Clubs/Center
- (s) Other

## Worksheet C2

### Participant Characteristics

#### Education Strategy

ADP 7235C

Prevention Activities Data System (PADS)

Service Provider: \_\_\_\_\_

Date: \_\_\_\_\_

Period of Performance \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_

Preparer: \_\_\_\_\_

1. Educational Services(s) Carry over from Worksheet C1	2. Race/Ethnicity Use Codes Listed on Backside of Worksheet	3. Age (Years) Use Codes Listed on Backside of Worksheet	4. Gender Use Codes Listed on Backside of Worksheet	5. Subtotal

### **Race/Ethnicity Codes**

- (a) White, Not Hispanic
- (b) Asian or Pacific Islander
- (c) Hispanic/Latino
- (d) Native American/Alaska Native
- (e) African American
- (f) Multiracial/Multiethnic
- (g) Other

### **Age Codes**

- (a) Under 5
- (b) 5-9
- (c) 10-12
- (d) 13-15
- (e) 16-18
- (f) 19-25
- (g) 26-55
- (h) Over 55

### **Gender Codes**

M = Male  
F = Female  
O = Other

## EDUCATION STRATEGY– ADP 7235C

(To view the ADP 7235C form, click on Forms as listed on the PADS introductory page)

## EDUCATION STRATEGY– ADP 7235C

(To view the ADP 7235C form, click on Forms as listed on the PADS introductory page)

## SECTION 5

### ALTERNATIVES STRATEGY – ADP 7235D

*This strategy provides for the participation of target populations in activities that exclude alcohol, tobacco, and other drug use. The assumption is that constructive and healthy activities offset the attraction to or otherwise meet the needs usually filled by alcohol, tobacco, and other drugs and would, therefore, minimize or remove the need to use these substances.*

Federal Register, 58: 60  
March 31, 1993

Alternative programs and activities redirect individuals from potentially problematic settings and activities to situations free from the influence of alcohol and other drugs.

The purpose of ADP 7235D is to document the use of the Alternatives Strategy as part of a county's overall prevention plan. Most of the issues that emerged in the discussions with service providers and county officials centered on the definitions of some of the alternative service categories included on the form. As in all the ADP 7235B-F forms, the Alternatives Strategy, ADP 7235D form, includes four sections: *Section A – Provider/Program Information*; *Section B – Service Populations*; *Section C – Service Delivered*; and *Section D – Where Services Occurred*. A copy of ADP 7235D can be referenced on page 51. The following information supplements the basic completion instructions that are printed on the reverse side of the form.

#### **Section A . Provider/Program Information**

Section A1 – A5 require basic identification information (*county name, provider name, provider identification number, and contact information*). This information should be identical to that provided on ADP 7235A. This information is necessary should the series of forms become separated.

#### **Section B. Service Populations**

*Service Populations* provides a listing of potential populations that can be served by this strategy. The *Service Populations* section is identical on ADP 7235B-F. In recording service populations, a provider selects the category that most closely describes the groups or individuals who are the recipients of the prevention service. If a provider identifies that they are serving a majority of the populations listed, it would be best to choose (*k*) *General Population* rather than checking multiple boxes. See Appendix A for definitions of service populations.

#### **Section C. Service Delivered**

Section C1 lists *Services Requiring Demographics*. For each service delivered, the provider should enter the number of times the service was provided in the *Frequency* column and then enter the *Number Served*. Identify if the *Number Served* is actual or estimated by entering an A or E in the designated column.

Sections C2 *Race/Ethnicity*, C3 *Age*, and C4 *Gender* directly link the participants with the services delivered. Enter the demographic breakdown; the *Totals* for each section should match the *Number Served* in C1. See the back of the form for more detailed demographic information.

## Section D. Where Services Occurred

This is a list of locations where services might occur. The provider is required to select the location(s) that most closely describe where the services occurred. A new location has been added; (d) *County/Provider Office*.

## QUESTIONS

The following questions were asked by county personnel and prevention providers when completing Form ADP 7235D:

1. **It is not clear to me how you would determine what activities would be included for some of the services listed in Section C1. Please provide definitions for the following:** (Some of the following definitions are provided by CSAP.)
  - Alcohol/Tobacco/Drug-Free Social/Recreational Events: Social and recreational events for youth and adults that specifically exclude the use of alcohol, tobacco, and other drugs. Examples are: Project (Sober) Graduation and similar events, after-prom parties, alcohol-, tobacco-, and other drug-free school events, alcohol-, tobacco-, and other drug-free community events, and smoke-free gatherings and events.
  - Community Drop-In Centers Operating: Centers that provide community facilities and structured prevention services that do not permit alcohol, tobacco, or other drug use on their premises. This refers to the facility and is not an activity per se. The appropriate way to count this is to simply **document the number of community drop-in centers operating one time per year**. Examples of community-drop-in centers include teen centers, community centers, recreation centers, or senior citizen centers. Community drop-in centers have an N/A under the number of persons served, as it is not an appropriate category for counting individuals served or tracking demographic characteristics.
  - Community Drop-In Center Activities: Substance abuse prevention activities and events held at community drop-in centers that offer social, recreational, and learning environments free of alcohol, tobacco, and other drugs. See examples above of where these activities would take place.
  - Community Service Activities: Functions intended to prevent substance abuse by involving youth and adults in providing a variety of community services. Examples are: community clean-up activities, events to repair or rebuild neighborhoods, fundraising for charitable causes; and support to the elderly, handicapped, ill, etc.
  - Recreational Activities: Activities, as compared to events, that youth and adults would participate in that specifically exclude the use of alcohol, tobacco, and other drugs. The key words are “active participation” rather than attendance. Examples are: participation on sports teams, participation in theatrical or musical productions, etc.
  - Youth/Adult Leadership Activities: Services through which youth/adult role models work with youth to help prevent substance abuse. Examples are: tutoring programs, coaching activities, adult-mentoring programs, adult-led youth groups, youth/peer mentoring programs. A mentoring program is defined as a relationship over a prolonged period of time



between two or more people in which the older, wiser, more experienced individual(s) provides stable, as-needed support, guidance, and concrete help to the younger, at-risk person(s).

2. **How do we correctly count *Frequency* and *Number Served* for (c) *Community Center Drop-In Activities*?**

- The number of days the Drop-In Center was open for service would be noted in the *Frequency* column. The number of unique individuals that frequent the center would be noted in the *Number Served* column. If the same individual uses the center repeatedly during a fiscal year, they are to be counted only once.

## WORKSHEETS

Several optional data collection worksheets have been developed to assist counties and service providers collect and aggregate the information required in ADP 7235B-G forms. **These worksheets are not required and are not to be submitted to ADP.**

### Worksheet D1 – Service Population and Service Location

The purpose of Worksheet D1 is to provide a tool to document information that corresponds with form ADP 7235D.

- Service Provider. Enter the name or identification of the service provider.
  - Date. Enter the date that the form is completed.
  - Period of Performance. Note the actual period of time covered by this worksheet. Some service providers may want to tally their efforts monthly. Those that make less use of this strategy might document their efforts over a longer period of time (e.g., a quarter or even a year's worth of information on one worksheet). The important factor is to document the event as close to the service date as possible to ensure an accurate capture of data.
  - Worksheet Preparer. Enter the individual/agency responsible for completing the worksheet.
1. (Column 1) Alternative Service(s). While the ADP 7235D form includes a number of alternative approaches, many of the approaches are general and local agencies may want to document the type of service by name on the worksheet to facilitate a more accurate tracking of the services. A service provider could also use the alpha code designation of the services listed on the ADP 7235D form (e.g., (a) *ATOD-Free Social/Recreational Events*, (b) *Community Drop-In Centers Operating*, etc.).
  2. (Column 2) Frequency. Enter the frequency of the service activity. This information will help facilitate an accurate response on ADP 7235D, Section C1. This information may also be helpful in determining potential audiences' impact.
  3. (Column 3) Number Served. Document the persons served and whether this is an estimated or actual count. This number should represent an unduplicated count of the individuals involved with each educational activity.
  4. (Column 4) Service Population. Indicate the service populations receiving services. Using the alpha code designation listed on ADP 7235D, Section B (e.g., (a) *Business and Industry*, (b) *Children of Substance Abusers*, etc.).

5. (Column 5) Where Services Occurred. Indicate where the product/service was provided. Using the alpha code designation of the service locations listed on ADP 7235D, Section D (e.g., *(a) Alternative Schools, (h) Parks/Recreation, etc.*).

## **Worksheet D2 – Participant Demographics**

Worksheet D2 was developed to assist service providers/agencies in responding to ADP 7235D, Section C2 *Race/Ethnicity*, C3 *Age* and C4 *Gender*. The procedure for completing this worksheet follows the structure and format of Worksheet D1. Worksheet D2 requires a listing of each of the product(s)/services(s) and the documentation of the demographics of the service recipients. It is anticipated that estimates for some products/services will be used. The following are some guidelines to ensure that appropriate procedures are used:

1. Numbers are required. Do not use percentages.
2. Estimates are acceptable. Given the difficulty in determining potential audience size, estimates may be the only way to provide these numbers.
3. *Numbers Served* or impacted by the product/service was already provided in Section C1, *Services Requiring Demographics*. The combined total in that section should equal the *Totals* in each of the subsections of C2, C3, and C4.
4. General population demographics for census tract information was cited as a source of use by some of the service providers who completed the initial set of ADP 7235 forms.

## Worksheet D1

### Service Population And Service Location

#### Alternatives Strategy

ADP 7235D

Prevention Activities Data System (PADS)

Service Provider: \_\_\_\_\_

Date: \_\_\_\_\_

Period of Performance \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_

Preparer: \_\_\_\_\_

1. Alternative Services(s) Use Codes Listed on Backside of Worksheet	2. Frequency (No. of Times the Service was Provided)	3. Number Served & Estimated or Actual (A or E)	4. Service Population Use Codes Listed on Backside of Worksheet	5. Where Service Occurred Use Codes Listed on Backside of Worksheet

## Alternatives Service Codes

- (a) Alcohol/Tobacco/Drug-Free Social/Recreational
- (b) Community Drop-In Centers Operating
- (c) Community Drop-In Center Activities
- (d) Community Service Activities
- (e) Friday Night Live (FNL)/Club Live/FNL Kids
- (f) Outward Bound
- (g) Recreational Activities
- (h) Youth/Adult Leadership Activities (Includes Mentoring)
- (i) Other

## Service Population Codes

- (a) Business and Industry
- (b) Children of Substance Abusers\*
- (c) Civic Groups/Coalitions
- (d) College Students
- (e) Delinquent/Violent Youth\*
- (f) Economically Disadvantaged\*
- (g) Elementary School Students
- (h) Employee Groups/Unions
- (i) Fire Professionals
- (j) Gangs
- (k) General Population
- (l) Government/Elected Officials
- (m) Health Professionals
- (n) High School Students
- (o) HIV Infected Persons
- (p) Homeowners Associations
- (q) IV Drug Users
- (r) Law Enforcement/Military
- (s) Lesbian/Gay/Bisexual/Transgender
- (t) Local Municipal Agencies
- (u) Middle/Jr High School Students
- (v) Neighborhood Associations
- (w) Older Adults
- (x) Parents/Families
- (y) People With Mental Health Problems\*
- (z) Persons Using Substances\*
- (aa) Persons With Physical Disabilities\*
- (bb) Physical/Emotional Abuse Victims\*
- (cc) Pregnant Women/Teens\*
- (dd) Preschool Students
- (ee) Prevention/Treatment Professionals
- (ff) Professional/Trade Associations
- (gg) Religious Groups
- (hh) Retailers
- (ii) Runaway/Homeless Youth\*
- (jj) School Dropouts\*
- (kk) Social Service Provider
- (ll) Teachers/Administrators/Counselors
- (mm) Voluntary/Fraternal Community Service
- (nn) Women and Children
- (oo) Youth/Minors
- (pp) Other

## Where Service Occurred Codes

- (a) Alternative Schools
- (b) Community At Large
- (c) Community Center
- (d) County/Provider Office
- (e) Criminal Justice System
- (f) Faith Center
- (g) Health Center/Clinic
- (h) Hospital
- (i) Parks/Recreation
- (j) Public Housing
- (k) Residential Treatment
- (l) School
- (m) Street Outreach
- (n) Transitional Housing
- (o) Treatment Facility
- (p) University/College
- (q) Work Place
- (r) Youth Clubs/Center
- (s) Other

## Worksheet D2

### Participant Characteristics

**Alternatives Strategy**

ADP 7235D

Prevention Activities Data System (PADS)

Service Provider: \_\_\_\_\_

Date: \_\_\_\_\_

Period of Performance \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_

Preparer: \_\_\_\_\_

1. Alternative Services(s) Carry over from Worksheet D1	2. Race/Ethnicity Use Codes Listed on Backside of Worksheet	3. Age (Years) Use Codes Listed on Backside of Worksheet	4. Gender Use Codes Listed on Backside of Worksheet	5. Subtotal

### **Race/Ethnicity Codes**

- (a) White, Not Hispanic
- (b) Asian or Pacific Islander
- (c) Hispanic/Latino
- (d) Native American/Alaska Native
- (e) African American
- (f) Multiracial/Multiethnic
- (g) Other

### **Age Codes**

- (a) Under 5
- (b) 5-9
- (c) 10-12
- (d) 13-15
- (e) 16-18
- (f) 19-25
- (g) 26-55
- (h) Over 55

### **Gender Codes**

- M = Male
- F = Female
- O = Other

## ALTERNATIVES STRATEGY– ADP 7235D

(To view the ADP 7235D form, click on Forms as listed on the PADS introductory page)

## ALTERNATIVES STRATEGY– ADP 7235D

(To view the ADP 7235D form, click on Forms as listed on the PADS introductory page)



## SECTION 6

### PROBLEM IDENTIFICATION AND REFERRAL STRATEGY – ADP 7235E

*This strategy aims at identification of those individuals who have indulged in illegal/age-inappropriate use of tobacco or alcohol and those individuals who have indulged in the first use of illicit drugs and to assess whether their behavior can be reversed through education. It should be noted, however, that this strategy does not include any activity designed to determine if a person is in need of treatment.*

Federal Register, 58:60  
March 31, 1993

Of the six CSAP primary prevention strategies, this one causes the most discussion and controversy because it appears to crossover from primary prevention into intervention and treatment. The CSAP definition clearly precludes services “designed to determine if a person is in need of treatment”; however, an assessment to determine if behavior can be reversed through education is allowed. After all, it may not be possible to know if a person’s need is education or treatment until after an initial assessment.

A key aspect of the strategy is that the service is educational for behavioral change, not therapeutic for ATOD abuse or dependency treatment. We recognize that some of the services within this strategy have the potential to bridge into treatment. It is important that providers note that administration of addiction severity instruments, case screening, and/or preparation for intervention are not a component of this strategy.

The purpose of ADP 7235E is to document the use of the Problem Identification and Referral Strategy as part of a county’s overall prevention plan. Most of the issues that emerged in the discussions with service providers and county officials centered on the definitions of some of the Problem Identification and Referral services included on the form. As in all the ADP 7235B-F forms, the Problem Identification and Referral Strategy, ADP 7235E form, includes four sections: *Section A – Provider/Program Information*; *Section B – Participant Based*; *Section C – Participant Characteristics*; and *Section D – Where Services Occurred*. A copy of ADP 7235E can be referenced on page 63. The following information supplements the basic completion instructions that are printed on the reverse side of the form.

#### **Section A . Provider/Program Information**

Section A1 – A5 require basic identification information (*county name, provider identification number, provider name, and contact information*). This information should be identical to that provided on ADP 7235A. This information is necessary should the series of forms become separated.

#### **Section B. Service Populations**

*Service Populations* provides a listing of potential populations that can be served by this strategy. The *Service Populations* section is identical on ADP 7235B-F. In recording service populations, a provider selects the category that most closely describes the groups or individuals who are the

recipients of the prevention service. If a provider identifies that they are serving a majority of the populations listed, it would be best to choose *(k) General Population* rather than checking multiple boxes. See Appendix A for definitions of service populations.

## Section C. Service Delivered

Section C1 lists *Services Requiring Demographics*. For each service delivered, the provider should enter the number of times the service was provided in the *Frequency* column and then enter the *Number Served*. Identify if the *Number Served* is actual or estimated by entering an A or E in the designated column.

Sections C2 *Race/Ethnicity*, C3 *Age*, and C4 *Gender* directly link the participants with the services delivered. Enter the demographic breakdown; the *Totals* for each section should match the *Number Served* in C1. See the back of the form for more detailed demographic information.

## Section D. Where Services Occurred

This is a list of locations where services might occur. The provider is required to select the location(s) that most closely describe where the services occurred. A new location has been added; *(d) County/Provider Office*.

## QUESTIONS

The following questions were asked by county personnel and prevention providers when completing Form ADP 7235E:

1. **It is not clear to me how you would determine what activities would be included for some of the services in Section C1. Please provide definitions for the following:** (Some of the following definitions are provided by CSAP.)
  - **Employee Assistance Programs:** Services intended to provide substance abuse information for individuals whose substance abuse-related problems may be interfering with work performance. Examples are: workplace prevention education programs, risk reduction education for work-related problems involving substance abuse, health education and health promotion programs for employees, supervisor training, workplace policy development, screening for referral.
  - **DUI/DWI/MIP Programs:** Structured prevention education programs intended to change the behavior of youth and adults. Examples of programs are: alcohol-related highway traffic safety classes, and alcohol and other drug awareness seminars or education programs. For the DUI/DWI/MIP (Driving Under the Influence, Driving While Intoxicated, Minors in Possession) category, count the number of identifications, referrals, and education programs. Do not count individuals who are actually enrolled in DUI/DWI court-mandated programs. In California, the court system mandates that individuals attend DUI/DWI programs as a result of an arrest and requires that each individual pay for the program. ADP grant funds are not connected with the actual DUI/DWI court-mandated programs; therefore, only those education programs associated with ADP grant funds are counted by PADS.
  - **Prevention Assessment and Referral Services:** Those activities intended to **provide risk screening, assessment, and referral** to prevention service populations for placement in prevention or **other appropriate services**. (Emphasis added.)The inclusion of this CSAP

category seems to be at odds with the definition provided by the Federal Register for the Problem Identification and Referral Strategy; see page 3, question #1.

- **Student Assistance Programs**: Structured prevention programs intended to provide substance abuse information for students whose substance abuse may be interfering with their school performance. Examples are: early identification of student problems, referral to designated helpers, follow-up services, in-school services (e.g., support groups), screening for referral, referral to outside agencies, school policy development.

**2. Why are violence programs included?**

- The inclusion of violence programs reflects the correlation between violence and ATOD affected behavior. The inclusion of either men's or women's alternative to violence programs must satisfy two criteria; (1) it must be a program receiving prevention dollars, and (2) it must offer, as part of its overall service, specific information about ATOD issues. A counseling service or a facility that primarily provides temporary safe refuge for individuals is not ATOD primary prevention and is not counted in PADS.

**3. We have a provider who does not operate an Employee Assistance Program (EAP), but does refer individuals elsewhere for EAP services. How do we report this?**

- Providers who do not have Employee Assistance or Student Assistant Programs within their programs, would count the *Frequency* and the *Number Served* that are referred to a program outside their services as (d) *Prevention Assessment and Referral Services*.

**4. We have a provider who is primarily a treatment facility, but who also receives primary prevention funds. This provider spends many hours doing assessments and providing referrals. Can the *Frequency* and the *Number Served* assessing and referring persons be counted on the 7235E PADS form under (d) *Prevention Assessment and Referral Services*? For example, a person is suspected of having a drug problem because marijuana was found in his possession. This person has no known treatment history. A pre-assessment and referral is done by the provider's staff. Can the provider count the activity under this strategy?**

- Yes. A treatment provider who has been funded to perform some primary prevention activities could provide pre-assessment services to clarify concerns and then refer for educational assistance or treatment diagnosis. For a treatment provider, this primary prevention strategy ends at the point that service is given by certified/licensed staff who perform diagnosis or prescribe treatment.

Treatment program components such as aftercare, relapse prevention, continuing support, job assistance or drug free housing are not considered primary prevention. They should not be included on any of the PADS forms or paid for with primary prevention funds.

After a person completes a treatment program and is the recipient of prevention services within other strategies, s/he would be counted the same as any other person receiving prevention.

**5. The services within this strategy all appear to be programs. When counting *Frequency* do we indicate the number of programs operating or the number of referrals?**

- Providers should note the number of referrals in the *Frequency* column.

## WORKSHEETS

Several optional data collection worksheets have been developed to assist counties and service providers collect and aggregate the information required in ADP 7235B-G forms. **These worksheets are not required and are not to be submitted to ADP.**

### Worksheet E1 – Service Population and Service Location

The purpose of Worksheet E1 is to provide a tool to document information that corresponds with form ADP 7235E.

- Service Provider. Enter the name or identification of the service provider.
  - Date. Enter the date that the form is completed.
  - Period of Performance. Note the actual period of time covered by this worksheet. Some service providers may want to tally their efforts monthly. Those that make less use of this strategy might document their efforts over a longer period of time (e.g., a quarter or even a year's worth of information on one worksheet). The important factor is to document the event as close to the service date as possible to ensure an accurate capture of data.
  - Worksheet Preparer. Enter the individual/agency responsible for completing the worksheet.
1. (Column 1) Problem Identification and Referral Service(s). While ADP 7235E includes a number of alternative approaches, many of the approaches are general and local agencies may want to document the type of service by name on the worksheet to facilitate a more accurate tracking of the services. A service provider could also use the alpha code designation of the services listed on ADP 7235D (e.g., (a) *Employee Assistance Programs*, (b) *DUI/DWI/MIP Education Programs*, etc.).
  2. (Column 2) Frequency. Enter the frequency of the service activity. This information will help facilitate an accurate response on ADP 7235E, Section C1. This information may also be helpful in determining potential audiences' impact.
  3. (Column 3) Number Served. Document the persons served and whether this is an estimated or actual count. This number should represent an unduplicated count of the individuals involved with each educational activity.
  4. (Column 4) Service Population. Indicate the service populations receiving services. Using the alpha code designation listed on ADP 7235E, Section B (e.g., (a) *Business and Industry*, (b) *Children of Substance Abusers*, etc.).
  5. (Column 5) Where Services Occurred. Indicate where the product/service was provided. Using the alpha code designation of the service locations listed on ADP 7235E, Section D (e.g., (a) *Alternative Schools*, (h) *Parks/Recreation*, etc.).

### Worksheet E2 – Participant Demographics

Worksheet E2 was developed to assist service providers/agencies in responding to ADP 7235E, Section C2 *Race/Ethnicity*, C3 *Age* and C4 *Gender*. The procedure for completing this worksheet follows the structure and format of Worksheet E1. Worksheet E2 requires a listing of each of the product(s)/services(s) and the documentation of the demographics of the service recipients. It is

anticipated that estimates for some products/services will be used. The following are some guidelines to ensure that appropriate procedures are used:

1. Numbers are required. Do not use percentages.
2. Estimates are acceptable. Given the difficulty in determining potential audience size, estimates may be the only way to provide these numbers.
3. *Numbers Served* or impacted by the product/service was already provided in Section C1, *Services Requiring Demographics*. The combined total in that section should equal the *Totals* in each of the subsections of C2, C3, and C4.
4. General population demographics for census tract information was cited as a source of use by some of the service providers who completed the initial set of ADP 7235 forms.



## Worksheet E1

### Service Population And Service Location

#### Problem Identification and Referral Strategy

ADP 7235E

Prevention Activities Data System (PADS)

Service Provider: \_\_\_\_\_

Date: \_\_\_\_\_

Period of Performance \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_

Preparer: \_\_\_\_\_

1. Problem Identification and Referral Service(s) Use Codes Listed on Backside of Worksheet	2. Frequency (No. of Times the Service was Provided)	3. Number Served & Estimated or Actual (A or E)	4. Service Population Use Codes Listed on Backside of Worksheet	5. Where Service Occurred Use Codes Listed on Backside of Worksheet

## Problem ID & Referral Service Codes

- (a) Employee Assistance Programs
- (b) DUI/DWI/MIP Education Programs
- (c) Mens Alternative to Violence Programs
- (d) Prevention Assessment and Referral Services
- (e) Student Assistance Programs
- (f) Womens Alternative to Violence Programs
- (g) Other

## Service Population Codes

- (a) Business and Industry
- (b) Children of Substance Abusers\*
- (c) Civic Groups/Coalitions
- (d) College Students
- (e) Delinquent/Violent Youth\*
- (f) Economically Disadvantaged\*
- (g) Elementary School Students
- (h) Employee Groups/Unions
- (i) Fire Professionals
- (j) Gangs
- (k) General Population
- (l) Government/Elected Officials
- (m) Health Professionals
- (n) High School Students
- (o) HIV Infected Persons
- (p) Homeowners Associations
- (q) IV Drug Users
- (r) Law Enforcement/Military
- (s) Lesbian/Gay/Bisexual/Transgender
- (t) Local Municipal Agencies
- (u) Middle/Jr High School Students
- (v) Neighborhood Associations
- (w) Older Adults
- (x) Parents/Families
- (y) People With Mental Health Problems\*
- (z) Persons Using Substances\*
- (aa) Persons With Physical Disabilities\*
- (bb) Physical/Emotional Abuse Victims\*
- (cc) Pregnant Women/Teens\*
- (dd) Preschool Students
- (ee) Prevention/Treatment Professionals
- (ff) Professional/Trade Associations
- (gg) Religious Groups
- (hh) Retailers
- (ii) Runaway/Homeless Youth\*
- (jj) School Dropouts\*
- (kk) Social Service Provider
- (ll) Teachers/Administrators/Counselors
- (mm) Voluntary/Fraternal Community Service
- (nn) Women and Children
- (oo) Youth/Minors
- (pp) Other

## Where Service Occurred Codes

- (a) Alternative Schools
- (b) Community At Large
- (c) Community Center
- (d) County/Provider Office
- (e) Criminal Justice System
- (f) Faith Center
- (g) Health Center/Clinic
- (h) Hospital
- (i) Parks/Recreation
- (j) Public Housing
- (k) Residential Treatment
- (l) School
- (m) Street Outreach
- (n) Transitional Housing
- (o) Treatment Facility
- (p) University/College
- (q) Work Place
- (r) Youth Clubs/Center
- (s) Other



## Worksheet E2

### Participant Characteristics

**Problem Identification and Referral Strategy**  
 ADP 7235E  
 Prevention Activities Data System (PADS)

Service Provider: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 Period of Performance \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Preparer: \_\_\_\_\_

1. Problem Identification and Referral Service(s) Carry over from Worksheet E1	2. Race/Ethnicity Use Codes Listed on Backside of Worksheet	3. Age (Years) Use Codes Listed on Backside of Worksheet	4. Gender Use Codes Listed on Backside of Worksheet	5. Subtotal

### **Race/Ethnicity Codes**

- (h) White, Not Hispanic
- (i) Asian or Pacific Islander
- (j) Hispanic/Latino
- (k) Native American/Alaska Native
- (l) African American
- (m) Multiracial/Multiethnic
- (n) Other

### **Age Codes**

- (i) Under 5
- (j) 5-9
- (k) 10-12
- (l) 13-15
- (m) 16-18
- (n) 19-25
- (o) 26-55
- (p) Over 55

### **Gender Codes**

- M = Male
- F = Female
- O = Other

PROBLEM IDENTIFICATION AND REFERRAL STRATEGY -- ADP 7235E  
(To view the ADP 7235E form, click on Forms as listed on the PADS introductory page)

PROBLEM IDENTIFICATION AND REFERRAL STRATEGY -- ADP 7235E  
(To view the ADP 7235E form, click on Forms as listed on the PADS introductory page)

## SECTION 7

### COMMUNITY-BASED PROCESS STRATEGY – ADP 7235F

*This strategy aims to enhance the ability of the community to more effectively provide prevention and treatment services for alcohol, tobacco, and drug abuse disorders. Activities in this strategy include organizing, planning, and enhancing efficiency and effectiveness of services implementation, interagency collaboration, coalition building, and networking.*

Federal Register, 58:60  
March 31, 1993

The past decade has seen an increased use of community-based processes for supporting prevention outcomes. The nationally funded community partnerships and later community collaboration grants are evidence of the heightened awareness of the importance of community approaches in addressing alcohol, tobacco, and other drug problems. This strategy area includes a broad range of activities including assessing community needs, developing community teams, providing technical support and training, and organizing community efforts. For many California communities there will be a close link between community organizing efforts and their use of Environmental Strategy approaches.

The purpose of ADP 7235F is to document the use of the Community Based Process Strategy as part of a county's overall prevention plan. Most of the issues that emerged in the discussions with service providers and county officials centered on the definitions of some of the service categories included on the form. As in all the ADP 7235B-F forms, the Community-Based Process Strategy, ADP 7235F form, includes four sections: *Section A – Provider/Program Information*; *Section B – Participant Based*; *Section C – Participant Characteristics*; and *Section D – Where Services Occurred*. A copy of ADP 7235F can be referenced on page 73. The following information supplements the basic completion instructions that are printed on the reverse side of the form.

#### **Section A . Provider/Program Information**

Section A1 – A5 require basic identification information (*county name, provider identification number, provider name, and contact information*). This information should be identical to that provided on ADP 7235A. This information is necessary should the series of forms become separated.

#### **Section B. Service Populations**

*Service Populations* provides a listing of potential populations that can be served by this strategy. The *Service Populations* section is identical on ADP 7235B-F. In recording service populations, a provider selects the category that most closely describes the groups or individuals who are the recipients of the prevention service. If a provider identifies that they are serving a majority of the populations listed, it would be best to choose (*k*) *General Population* rather than checking multiple boxes. See Appendix A for definitions of service populations.

## Section C. Service Delivered

Section C1 lists *Services Requiring Demographics*. For each service delivered, the provider should enter the number of times the service was provided in the *Frequency* column and then enter the *Number Served*. Identify if the *Number Served* is actual or estimated by entering an A or E in the designated column.

Sections C2 *Race/Ethnicity*, C3 *Age*, and C4 *Gender* directly link the participants with the services delivered. Enter the demographic breakdown; the *Totals* for each section should match the *Number Served* in C1. See the back of the form for more detailed demographic information.

Section C5 lists *Services Not Requiring Demographics*. For each service delivered, enter the number of times the activity took place in the *Frequency* column.

## Section D. Where Services Occurred

This is a list of locations where services might occur. The provider is required to select the location(s) that most closely describe where the services occurred. A new location has been added; (d) *County/Provider Office*.

## QUESTIONS

The following questions were asked by county personnel and prevention providers when completing Form ADP 7235F:

1. **It is not clear to me how you would determine what activities would be included for some of the services listed in Section C1. Please provide definitions for the following:** (Some of the following definitions are provided by CSAP.)
  - Assessing Community Needs/Assets: Implementing prevention-focused tasks to determine the needs for prevention services, identify at-risk populations, or determine priority prevention populations for service delivery. Examples are: conducting/participating in statewide prevention needs assessments, conducting community prevention needs assessments, neighborhood needs assessments. Counties/providers would probably use the General Population category to indicate the service population.
  - Accessing Services/Funding: Assisting communities in increasing or improving their prevention and treatment service capacity by developing resources to support those services. Examples are: developing and maintaining a resource listing of federal, state, and local funding programs, accessing and coordinating federal, state, and local grants, developing program budgets.
  - Community Team Activities (includes multi-agency coordination/collaboration): Activities or services conducted with or sponsored by formalized community teams for the purpose of fostering, supporting, or enhancing community prevention services. Community team activities are recorded as the number of sponsored events (*Frequency*); the *Number Served* and demographics are not recorded. Examples are: multiagency coordination and collaboration, community mobilization events, development or implementation of action plans, civic advocacy, joint planning or programming between two or more agencies or organizations, development of interagency or multiagency cooperative agreements to provide prevention services.

- **Community/Volunteer Services or Training**: Structured prevention activities intended to impart information and teach organizational development skills to individuals or community groups. Examples are: community volunteer services, action planning for community decision makers, multicultural leadership mobilization activities, neighborhood action services.
- **Formal Community Teams**: Formalized community organizations concerned with fostering common interests and advocacy for prevention services. Formal Community Teams are counted only one time once the formal community team is formed. (Activities that teams conduct or engage in are counted under Community Team Activities) Examples are: regular and ongoing participation in interagency councils or multiagency task forces, alliances, coalitions, groupings of citizens, including youth, who promote healthy communities, families, schools, and activities.
- **Systematic Planning**: Structured services that help communities to identify prevention needs, assess existing prevention services, set priorities, and allocate prevention resources systematically, based on objective needs assessments. The specific plan is the product to be counted. Examples are: agency/provider strategic plan, community team/organization plan, block grant plan, state prevention plan.
- **Technical Assistance (TA)**: Services provided by professional prevention staff intended to provide technical guidance to prevention programs, community organization, and individuals to conduct, strengthen, or enhance activities to promote prevention. Services recorded under this service should be viable technical assistance that will lead to a final product. Examples are: addressing cultural competence, developing an action plan/capacity building, quality assurance and improvement, conducting evaluations, adding programs and services, developing funding and resources, providing professional expertise, organizational development.
- **Training Services**: Structured substance abuse prevention training events intended to develop proficiency in prevention program design, development, and delivery skills. (General public education is not included in this set of services and should be counted under Speaking Engagement in the Information Dissemination Strategy.) Examples are: developing prevention training curricula, conducting prevention training programs, training of trainers, other formal skill-building activities.

## 2. Please discuss Friday Night Live and Club Live as a Community-Based Strategy.

- While FNL/CL might best be placed within the Educational or Alternative Strategy, many chapters have developed Community-Based Strategy service components as part of the FNL experience. These activities relative to the services within this strategy can be noted as *(b) Friday Night Live (FNL)/Club Live/FNL Kids*.

## WORKSHEETS

Several optional data collection worksheets have been developed to assist counties and service providers collect and aggregate the information required in ADP 7235B-G. **These worksheets are not required and are not to be submitted to ADP.**

### Worksheet F1 – Service Population and Service Location

The purpose of Worksheet F1 is to provide a tool to document information that corresponds with form ADP 7235F.

- Service Provider. Enter the name or identification of the service provider.
  - Date. Enter the date that the form is completed.
  - Period of Performance. Note the actual period of time covered by this worksheet. Some service providers may want to tally their efforts monthly. Those that make less use of this strategy might document their efforts over a longer period of time (e.g., a quarter or even a year's worth of information on one worksheet). The important factor is to document the event as close to the service date as possible to ensure an accurate capture of data.
  - Worksheet Preparer. Enter the individual/agency responsible for completing the worksheet.
1. (Column 1) Community Based Process(s). While ADP 7235F includes a number of community-based approaches, many of the approaches are general and local agencies may want to document the type of service by name on the worksheet to facilitate a more accurate tracking of the services. A service provider could also use the alpha code designation of the services listed on ADP 7235 F (e.g., *(a) Community/Volunteer Services or Training, (c) Technical Assistance (TA)*, etc.).
  2. (Column 2) Frequency. Enter the frequency of the service activity. This information will help facilitate an accurate response on ADP 7235F, Section C1. This information may also be helpful in determining potential audiences' impact.
  3. (Column 3) Number Served. Document the persons served and whether this is an estimated or actual count. This number should represent an unduplicated count of the individuals involved with each educational activity.
  4. (Column 4) Service Population. Indicate the service populations receiving services. Using the alpha code designation listed on ADP 7235F, Section B (e.g., *(a) Business and Industry, (b) Children of Substance Abusers*, etc.).
  5. (Column 5) Where Services Occurred. Indicate where the product/service was provided. Using the alpha code designation of the service locations listed on ADP 7235F, Section D (e.g., *(a) Alternative Schools, (h) Parks/Recreation, etc.*).

## Worksheet F2 – Participant Demographics

Worksheet F2 was developed to assist service providers/agencies in responding to ADP 7235F, Section C2 *Race/Ethnicity*, C3 *Age* and C4 *Gender*. The procedure for completing this worksheet follows the structure and format of Worksheet F1. Worksheet F2 requires a listing of each of the product(s)/services(s) and the documentation of the demographics of the service recipients. It is anticipated that estimates for some products/services will be used. The following are some guidelines to ensure that appropriate procedures are used:

1. Numbers are required. Do not use percentages.
2. Estimates are acceptable. Given the difficulty in determining potential audience size, estimates may be the only way to provide these numbers.
3. *Number Served* or impacted by the product/service was already provided in Section C1, *Services Requiring Demographics*. The combined total in that section should equal the *Totals* in each of the subsections of C2, C3, and C4.
4. General population demographics for census tract information was cited as a source of use by some of the service providers who completed the initial set of ADP 7235 forms.



## Worksheet F1

### Service Population And Service Location

**Community-Based Process Strategy**  
 ADP 7235F  
 Prevention Activities Data System (PADS)

Service Provider: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 Period of Performance \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Preparer: \_\_\_\_\_

1. Community-Based Process Service(s) Use Codes Listed on Backside of Worksheet	2. Frequency (No. of Times the Service was Provided)	3. Number Served & Estimated or Actual (A or E)	4. Service Population Use Codes Listed on Backside of Worksheet	5. Where Service Occurred Use Codes Listed on Backside of Worksheet

## Community-Based Service Codes

- (a) Assessing Community Needs/Assets
- (b) Accessing Services/Funding
- (c) Community Team Activities
- (d) Community/Volunteer Services or Training
- (e) Formal Community Teams
- (f) Friday Night Live (FNL)/Club Live/FNL Kids
- (g) Systematic Planning Services
- (h) Technical Assistance (TA)
- (i) Training Services
- (j) Other

## Service Population Codes

- (a) Business and Industry
- (b) Children of Substance Abusers\*
- (c) Civic Groups/Coalitions
- (d) College Students
- (e) Delinquent/Violent Youth\*
- (f) Economically Disadvantaged\*
- (g) Elementary School Students
- (h) Employee Groups/Unions
- (i) Fire Professionals
- (j) Gangs
- (k) General Population
- (l) Government/Elected Officials
- (m) Health Professionals
- (n) High School Students
- (o) HIV Infected Persons
- (p) Homeowners Associations
- (q) IV Drug Users
- (r) Law Enforcement/Military
- (s) Lesbian/Gay/Bisexual/Transgender
- (t) Local Municipal Agencies
- (u) Middle/Jr High School Students
- (v) Neighborhood Associations
- (w) Older Adults
- (x) Parents/Families
- (y) People With Mental Health Problems\*
- (z) Persons Using Substances\*
- (aa) Persons With Physical Disabilities\*
- (bb) Physical/Emotional Abuse Victims\*
- (cc) Pregnant Women/Teens\*
- (dd) Preschool Students
- (ee) Prevention/Treatment Professionals
- (ff) Professional/Trade Associations
- (gg) Religious Groups
- (hh) Retailers
- (ii) Runaway/Homeless Youth\*
- (jj) School Dropouts\*
- (kk) Social Service Provider
- (ll) Teachers/Administrators/Counselors
- (mm) Voluntary/Fraternal Community Service
- (nn) Women and Children
- (oo) Youth/Minors
- (pp) Other

## Where Service Occurred Codes

- (a) Alternative Schools
- (b) Community At Large
- (c) Community Center
- (d) County/Provider Office
- (e) Criminal Justice System
- (f) Faith Center
- (g) Health Center/Clinic
- (h) Hospital
- (i) Parks/Recreation
- (j) Public Housing
- (k) Residential Treatment
- (l) School
- (m) Street Outreach
- (n) Transitional Housing
- (o) Treatment Facility
- (p) University/College
- (q) Work Place
- (r) Youth Clubs/Center
- (s) Other

## Worksheet F2 Participant Characteristics

**Community-Based Process Strategy**  
ADP 7235F  
Prevention Activities Data System (PADS)

Service Provider: \_\_\_\_\_  
Date: \_\_\_\_\_  
Period of Performance \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_  
Preparer: \_\_\_\_\_

1. Community-Based Process Service(s) Carry over from Worksheet F1	2. Race/Ethnicity Use Codes Listed on Backside of Worksheet	3. Age (Years) Use Codes Listed on Backside of Worksheet	4. Gender Use Codes Listed on Backside of Worksheet	5. Subtotal

### **Race/Ethnicity Codes**

- (o) White, Not Hispanic
- (p) Asian or Pacific Islander
- (q) Hispanic/Latino
- (r) Native American/Alaska Native
- (s) African American
- (t) Multiracial/Multiethnic
- (u) Other

### **Age Codes**

- (q) Under 5
- (r) 5-9
- (s) 10-12
- (t) 13-15
- (u) 16-18
- (v) 19-25
- (w) 26-55
- (x) Over 55

### **Gender Codes**

- M = Male
- F = Female
- O = Other

COMMUNITY BASED PROCESS STRATEGY– ADP 7235F  
(To view the ADP 7235C form, click on Forms as listed on the PADS introductory page)

COMMUNITY BASED PROCESS STRATEGY– ADP 7235F  
(To view the ADP 7235C form, click on Forms as listed on the PADS introductory page)

## SECTION 8

### ENVIRONMENTAL STRATEGY – ADP 7235G

*This strategy establishes or changes written and unwritten community standards, codes, and attitudes, thereby influencing incidence and prevalence of the abuse of alcohol, tobacco, and other drugs used in the general populations. This strategy is divided into two subcategories to permit distinction between activities which center on legal and regulatory initiatives and those which relate to the service and action-oriented initiatives.*

Federal Register, 58:60  
March 31, 1993

The Environmental Strategy is the last of the six CSAP strategies. The first five strategies focus on who was served and the services they received. The Environmental Strategy focuses on places and specific problems, with an emphasis on public policy. A growing body of research and practice supports the environmental approach to prevention. The results can be wide-ranging and sustained, although specific recipients are not identifiable. Much of the initial development of the implementation of this strategy occurred in California. Dr. Fried Wittman, noted researcher in the environmental field, assisted in the preparation of the ADP 7235G form and the accompanying worksheets.

The purpose of ADP 7235G is to document the use of the Environmental Strategy as part of a county's overall prevention plan. "Environmental" prevention reduces ATOD availability and use risks associated with local retail, public, and social environments. ADP 7235G includes three sections: *Section A – Provider/Program Information; Section B – Target Environments, Problems and Environmental Approaches Used, Service Populations; and Section C – Environmental Services Provided.* A copy of ADP 7235G can be referenced on page 99. The following information supplements the basic completion instructions that are printed on the reverse side of the form.

#### **Section A. Provider/Program Information**

Section A1 – A5 require basic identification information (*county name, provider name, provider identification number, and contact information*). This information should be identical to that provided on the 7235A form. This information is necessary should the series of forms become separated.

#### **Section B. Target Environments**

Section B1, *Places* and B2, *Events* provide listings of settings or events identified as significant sources of ATOD-related behavioral problems in a community.

*Places* are facilities such as individual buildings and particular land-uses such as parks in which ATOD problems occur over time. *Events* are short-term occasions at which alcoholic beverages are sold or served at the site of the event.

The environmental approach involves modifying the place and its associated uses to reduce or eliminate the problematic practices. For example, off sale retailing of alcoholic beverages to youth

includes both places where alcohol is sold and a variety of problematic behaviors associated with those places.

Section B3, *Problems and Environmental Approaches Used*, provides a list of sources of ATOD problems and possible solutions. The “Three Actor Theory” helps planners determine both problems and solutions. Three sets of actors are involved with every problem environment, no matter how large or how small. The three sets are (1) owners/managers, (2) occupants/neighbors, and (3) officials/other interested parties. Some parties within each actor set contribute to ATOD problems associated with the environment. Some parties act to remove or reduce the problems. Sometimes the parties can change from being sources of problems to problem-solvers.

Section B4, *Service Populations*, provides a listing of potential populations that can be served by this strategy. In recording service populations, a provider would select the category that most closely describes the groups or individuals who are the recipients of the prevention service. See Appendix A on page 102 for definitions of *Service Populations*.

### **Section C. Environmental Services Provided for the Reporting Year(s)**

The *Environmental Services* section describes the service that is to be applied to prevent the principal problem. Widely used *Environmental Services* are summarized and referenced in the Environmental Approach to Community ATOD Prevention: An Action Manual, publication number ADP 97-3501, which is available at no charge through the California Department of Alcohol and Drug Programs, Resource Center, Sacramento, CA 95814, telephone 800-879-2772.

### **QUESTIONS**

The following questions were asked by county personnel and prevention providers when completing Form ADP 7235G:

1. **It is not clear to me how to determine what activities would be included for the services in this strategy. Please provide definitions for *Problems* in Section B3, *Problems and Environmental Approaches Used*. (vertical scale)**
  - Public Inebriation/Public Drinking: Problem drinking in any public place, or in places on view to the public (such as drinking in a private parking lot visible from the streets and alleys that serve the parking lot). Problem drinking occurs when public drinking is in violation of laws, and/or when public drinking is disruptive or injurious to neighbors, occupants of the environment, and/or officials.
  - Violence: Felony or misdemeanor assaults of any type.
  - Illicit Drug Dealing: Sale of controlled substances subject to criminal penalties for sale or possession except as permitted by federal law.
  - Driving Under the Influence (DUI): Operating a vehicle under the influence of alcohol/drugs as determined by legal status per se (exceeding 0.08 BAL) or by behavioral risk criteria that a sworn peace officer may use to make an arrest.
  - Other Crime: Misdemeanors or felonies that are not assaults.
  - Youth Access: Under age acquisition of tobacco/alcohol from commercial sources or social hosts. Greater rates of youth access are associated with perceptions that there are no or few barriers to youth access.



- Loitering, Littering, Noise: Excessive, repeated, and/or persistent levels of activity that disrupt owners, neighbors and occupants of the settings at and/or adjacent to the activity's location.
- Heavy Drinking or Drug Use: Repeated and/or persistent drinking/drug use that predominates or pre-empts all other activity at and/or adjacent to the settings where drinking/drug use occurs.
- Workplace/Other Organization Problem: Drinking/drug use in specific workplaces or other organizations in the community that creates disruptions, losses, and harm in those settings.

2. **It is not clear to me how to determine what activities would be included for the services in this strategy. Please provide definitions for *Approaches* in Section B3, *Problems and Environmental Approaches Used*. (horizontal scale)**

- Information/Education: Information/education activity, as defined by CSAP's definition of the term for eligible information/education activity, when this activity is devoted to increasing understanding and awareness of environmental aspects of alcohol/drug problems.
- Presentation: An action to inform and persuade an audience (individual or group) to modify a specific risk environment(s) associated with an identified alcohol/drug problem(s).
- Mass Rally: An action to organize many members of a particular community to take collective action immediately to modify a specific risk environment(s) associated with an identified alcohol/drug problem(s).
- Networking: Supporting and learning from other organizations that are encouraging or using environmental measures to prevent problems associated with alcohol/drug use and availability.
- Training: Educating others in the skills, techniques, and strategies necessary to apply environmental approaches for the reduction or prevention of alcohol and other drug problems.
- Documentation and Observation: Systematic recording of information about the nexus (relationship) between selected problematic alcohol/drug use and alcohol/drug availability in selected settings and circumstances.
- Official Action: Action that uses environmental approaches to reduce alcohol/drug problems and that is undertaken by the authority of a public agency, or by an incorporated organization that is officially recognized by the state. Action must be implemented at least in part by paid staff of said agency or organization.
- Media: Use of electronic and/or print media, including billboards, displays and signage, to advocate AOD prevention messages, and/or to challenge alcohol/drug industry messages that encourage use/abuse.

3. **It is not clear to me how to determine what activities would be included for the services in this strategy. Please provide definitions for the services within Section C, *Environmental Services Provided For The Reporting Year(s)*. (vertical scale)**

- Zoning Ordinances for Alcohol Outlets, New: Local ordinances that use planning and land-use regulations to control future alcohol outlets. This definition includes all establishments that seek original licenses from the State Department of Alcohol Beverage Control (ABC) and all establishments that seek to transfer an existing ABC licenses to a new location.
- Zoning Ordinances, Abate Existing Outlets: Local ordinances that use planning land-use regulations to control alcohol outlets currently in operation under an ABC license. This definition includes "deemed approved" ordinances and nuisance abatement actions.

- Drinking in Public Ordinances Passed/Improved: Local ordinances that regulate the consumption of alcohol in public places and/or at public events. Regulation may be prohibition (no drinking allowed) or conditional (permits may be required, drinking may be permitted only in restricted areas, only at certain times, only in certain circumstances, etc.).
- One-Day Event Requirements Passed/Improved: Permits provided by state and local governments for time-limited activities/events. Usually these activities/events run for a period of one to two days.
- School Policies Passed/Improved (K – 12 and college): Prevention policies of the school administration to eliminate settings or circumstances for alcohol/drug use and/or availability on or about the workplace premises. It is expected that students and faculty will participate with school administrators in the formation and implementation of the policies.
- Workplace Policies: Prevention policies of the workplace administration to eliminate settings or circumstances for alcohol/drug use and/or availability on or about the workplace premises. It is expected that workers will participate with workplace management in the formation and implementation of the policies.
- State ABC Regulations Passed/Improved: Participation in activities to create or expand public policy for the prevention of alcohol/drug problems specifically through legislation and regulations administered by the State ABC.
- Other Local Control Powers Passed/Improved: Participation in activities to create or expand public policy (other than planning and land-use ordinances as described under *Zoning Ordinances* above) for the prevention of alcohol/drug problems specifically through legislation and regulations administered by public agencies in a local jurisdiction.
- Social Host Training/Management Programs: Approved responsible beverage service programs for those who serve alcoholic beverages in settings or circumstances under the servers' control where the drinker does not pay for his/her drink. For example, at a private house party, (j) *Social Host Training* would be appropriate for the householder giving the party. At a large wedding party where alcohol is served to guests without charge at a private club, (j) *Social Host Training* would be appropriate primarily for the caterers of the event and the owners/managers of the club, and secondarily for the private sponsor of the event.
- Commercial Host Training/Management Programs: Approved responsible beverage service programs for ABC licensees (retailers and distributors of alcoholic beverages). An "approved responsible beverage service program" is one that meets curriculum and training standards that have been approved for their preventive value by a disinterested reviewing body such as the California Coordinating Council on Responsible Beverage Service.
- Holiday Campaigns and Special Events: Social activities offered during customary community holidays or special community events that are especially designed to be drug/alcohol free or alcohol safe; and /or heightened enforcement campaigns against DUI and drinking in public during customary community holidays or special community events.
- Managing Hi-Risk Advertising/Billboard Controls: Actions taken to remove high-risk alcoholic beverage advertisements/promotions from billboards and other public signage (such as bus cards). The definition of "high-risk" messages is left to the local program to determine on the basis of local community standards. Generally, the term is understood to include undue exposure of young people to alcohol messages by virtue of the message location near places where young people gather, messages which condone or encourage violence; messages which condone or encourage maltreatment of women.
- Facility Design to Prevent AOD Problems: Physical design to reduce the likelihood of problematic behaviors related to alcohol/drug use on or about the premises. This includes architectural design, landscaping, interior design, and lighting and décor planning.

- Improved Enforcement: Increased use of compliance visits and citations for violations to secure greater compliance with the purposes of the regulations.
  - Neighborhood Mobilization: Activities to enlist the active participation of neighbors (occupants of the areas) working in planning, designing, and implementing an alcohol/drug prevention initiative for a specific problem in that area.
  - Community Development: Activities to improve health and to increase social and economic well being in conjunction with alcohol/drug prevention initiatives being undertaken in the community.
4. **It is not clear to me how to determine what activities would be included for the services in this strategy. Please provide definitions for the services within Section C, *Environmental Services Provided For The Reporting Year(s)*. (horizontal scale)**
- Number of Projects Begun This Period and Number Continuing This Period: refers to the number of prevention initiatives taken to deal with selected problem environments. For example, passing a conditional use permit zoning ordinance to regulate new alcohol outlets is one project. Installing a pre-designed *Commercial Host Training Program* in the community is one project. Thus a single project may apply to many settings or circumstances of AOD use and availability.
  - Number of Policies Adopted This Period: refers to project objectives completed during the reporting period. For example, if the objective is to pass a Conditional Use Permit (CUP) ordinance, completion of this project (that is, adoption of the CUP by the local legislature) would be counted as “1”. If the objective is to conduct 20 training sessions for the pre-designed *Commercial Host Training Program*, achievement of the objective for this project would be counted as “20”. This reporting system can be meaningful to the County ADP and to the local programs actually providing prevention services if it is consistently applied, and if the meanings and purposes of the environmental prevention initiatives are clearly understood. The important information for the State and Federal point of view will be categorical information about which environmental services are being pursued, and whether any successes (not how many) are being achieved.
5. **Providers have been working with the police department to receive “one-day pass permits” for one-day events that serve/sell alcoholic beverages. As a result, the police department has initiated and is requiring training on Responsible Beverage Service (RBS) to the organizations requesting the “one-day pass permit.” How would this best be counted? Under (d) *One-Day Event Requirements Passes/Improved* or under (j) *Social Host Training/Management Programs*?**
- Both would be counted as program accomplishments. Securing a one-day event pass for alcohol sales is important, but does not necessarily include a requirement for RBS training. Many cities require one-day events to be listed with the police and put out a recommended list of good serving practices, which may or may not be followed, and may or may not be monitored. Requiring RBS training as a condition of approval is an additional quantum of protection, and should be counted as such.
6. **A church has a fish fry and they sell/serve beer and wine. They have obtained their “one-day pass” and have received RBS training. Would this be considered a (j) *Social Host Training/Management Program* or a (k) *Commercial Host Training/Management Program*? What are the definitions for “social” and “commercial?”**

- Generally speaking, *(k) Commercial Host Training Programs* are for circumstances where alcoholic beverages are being sold to strangers, and, therefore, require a California ABC one-day license. This is the case for fund-raisers of the type described in the scenario. A *(j) Social Host Training Program* is for circumstances where there is no direct or indirect charge for the alcohol, other than the creation of a reciprocal social obligation, and the event involves friends and acquaintances who all know each other.
7. **What about events that fall between commercial and social hosting, such as a college dorm party whose organizers charge for the keg, invite strangers with flyers and handbills, and do not get a license or register the part with the school?**
- The event is unlawful and doesn't qualify as prevention.
8. **How would a provider count (1) a letter-writing campaign to alcohol advertisers and manufacturers, (2) gear exchange, and (3) reduction of advertising efforts aimed at retailers? For example, a Friday Night Live group has initiated a letter-writing campaign to advertisers, manufacturers, etc., and has initiated a gear exchange campaign (e.g., exchanging Budweiser tee shirts for Friday Night Live tee shirts). They have also worked on a reduction of advertising promotion/campaign (e.g., asking store owners to take smoking/liquor advertising out of store windows and/or asking that the number of advertisements be reduced or in less prominent places). Would this be counted in Section B3, *Problems and Environmental Approaches Used*?**
- The answer lies with the campaign's level of detail for its actions. The more general campaign will probably be less focused and less clearly targeted. The greater the detail, the more specific the purpose and the more likely that several *Approaches* will be used together. For example, the letter-writing campaign might use *Info/Ed* activities to achieve general problem reductions (if so, mark *Info/Ed* under *Approaches*, and note "general" in the specify space following *(j) Other* under *Problems*). The letter-writing campaign might be a multifaceted campaign to achieve a specific objective (e.g., stop selling malt-liquors to young people by letter-writing, with follow-up visits to the establishment, leading to press-releases calling for stiffer public oversight – that is, *Info/Ed*, *Training*, *Media* and *Official Action*). The latter approach is more attractive as outcome-oriented prevention, provided base-line data have been collected on the targeted problem or practice.

## WORKSHEETS

Several optional data collection worksheets have been developed to assist counties and service providers collect and aggregate the information required on ADP 7235B-G. **These worksheets are not required and are not to be submitted to ADP.**

### Worksheet G1 – Alcohol, Tobacco and Other Drug (ATOD) Problem Environment

Worksheet G1 provides a tool to help describe the local ATOD problem environment that has been selected for prevention. The worksheet will document and support local planning processes to identify high-risk ATOD problem environments, to select an ATOD problem environment that will be the focus of a prevention initiative, to implement the initiative, and to evaluate the initiative's results. This worksheet corresponds with form ADP 7235G, Section B, *Target Environments*, Section B3, *Problems and Environmental Approaches Used*, and Section B4, *Service Populations*.

## Problem Environment

- Service Provider. Enter the name or identification of the service provider.
- Date. Enter the date that the form is completed.
- Worksheet Preparer. Enter the individual/agency responsible for completing the worksheet.
- Description. Provide a description that will be easy to reference during the planning process. The *Target Environments* are Section B1, *Places* and Section B2, *Events* that have been identified as significant sources of ATOD problems in the community.
  - *Places* are physical facilities or spaces such as individual buildings, classes of buildings, and particular land-uses such as parks in which ATOD problems occur over time. Examples of *Places* are “Joe’s Bar on Main Street,” “all off-sale alcohol outlets,” or “City Parking Lot.”
  - *Events* consist of social, psychological, and cultural cues that establish a set of expectations (norms) among those participating in the event. Examples of *Events* are short-term occasions at which ATOD problems occur and/or alcoholic beverages are sold/served at the site of the event. Examples are the “XYZ Corporation Annual Wine and Cheese Festival,” the “Smallville Independence Day Picnic,” and “unsupervised teenaged parties at private homes.”
- Service Population. List all the groups whose ATOD problems are expected to be reduced or eliminated by the initiative. Refer to the list on ADP 7235G, Section B4.
- Location. Provide the specific street address or nearest road intersection for particular facilities, specified classes of facilities, and events. Examples are: for addresses and intersections: “123 Main Street” for Joe’s Bar, “addresses for all off-sale retail establishments” for alcohol outlets, and “Main Street and Flower Street” for City Parking Lot.
- Geographic Area. If the problem environment is defined by a geographic area rather than a specific address, use the most appropriate description for the area of concern. Examples: street-boundaries, police beats, planning districts, and census tracts.
- Type of Place or Event. Select from the list of *Places* and *Events* shown under Form ADP 7235G, Section B1 and B2.
- Problem Time Frame. State when problems occur (time of day, day of week, days of month) and with what frequency problems occur (every day, every week or weekend, every month, several times during a season, etc.)
- Name of Owner/Property Manager. For properties at specific addresses/intersections, the owner’s name can be found in county tax records and on the ABC license if the establishment sells alcoholic beverages. The property manager is the name of the person on-site who is responsible for day-to-day operation. Note: The owner may be a public entity (e.g., Parking Lot No. 5 may be owned by the Anytown Parking Authority). If the owner is a private corporation or public entity such as a city, obtain the name of the individual responsible for the property in question. Document extreme difficulties in locating the owner or responsible party.

## Principal Problems Associated with Environment

- Problem 1, Problem 2, etc. List the principal *Problems* associated with the specific environment. Use the ATOD *Problem* list in ADP 7235G, Section B3.
- Evidence. Describe briefly the evidence for each *Problem*. Start a file on the available evidence for each *Problem*. This file will be important for establishing the “nexus” or relationship between *Problems* and the environment in question. Example: problems with “Joe’s Bar” might be violence reported by neighbors, police reports, youth access reported by a focus group, and/or DUI reports from a place-of-last-drink survey.

## Worksheets G2a and G2b – Alcohol, Tobacco and Other Drug (ATOD) Problem Sources and Problem Approaches

Worksheet G2a provides a tool to help identify the sources of ATOD problems in the environment by listing the various actors' contributions to the problems. Contributions should be listed only if there are observations and/or documentation to verify the connection between the problems and the environment in question. Worksheet G2b identifies approaches to the problems by listing contributions that various parties might make to reduce or eliminate the problems.

A central concept of environmental prevention is that it is possible to assign responsibility for ATOD-related problems for any geographic location (Section B1, *Places*) or gathering (Section B2, *Events*). Three categories (actors) interact within a given place/event:

1. Owners/managers – direct responsibility for what occurs on/around the site
2. Occupants/neighbors – support, ignore, enable, or engage in the problem
3. Officials/interested parties – oversight responsibility for health, safety, etc. (e.g., police)

The G2 worksheets help establish accountability among the three sets of actors for ATOD problems in the target environment. The worksheets can be used to encourage those actors most involved in the problems to work out the problems among themselves. The worksheets also can be used by other planning groups that represent broader community interests. The path chosen depends on the size and complexity of the ATOD problems. For example, the neighbors and owners of “Joe’s Bar” may be unable to work something out locally to cut down the burdensome noise and loitering outside the bar. However, the Mayor’s task force on public problems with cabarets in the downtown entertainment district will have to work on a broader base to respond to a wide range of concerns for public health, safety, and economic development issues. This worksheet corresponds to ADP 7235G, Section B3, *Problems and Environmental Approaches Used*.

For more information about the Three Actor Theory and environmental accountability for ATOD problems, see “Viewpoint” by Wittman and Wright in *Prevention Pipeline* (September 1997). See also the ASIPS/GIS Planning Manual, Section 3.2 (Wittman, Harding and Sparks, 1997).

### Alcohol, Tobacco, Other Drug (ATOD) Problem Sources

- Principal Problem. List each Principal Problem identified on Worksheet G1 (Problem 1, etc.) on G2a and G2b worksheets. Use a separate G2a and G2b Worksheet to list each problem separately.
- Principal Program Code. Refer to ADP 7235G, Section B3, *Problems and Environmental Approaches Used*. Enter the problem type from this list that most closely corresponds to the principal problem (e.g., (a) *Public Inebriation/Public Drinking*, (b) *Violence*, etc.).
- Owners and Managers. List the names of owners and managers of the property associated with the Problem Environment listed on Worksheet G1. List the names in descending order of importance for those who contribute most significantly to the Principal Problem. The same people may be responsible for several problems.
- Occupants and Neighbors. List the names of occupants and neighbors in descending order of importance for those who contribute most significantly to the Principal Problem. “Occupants” are the people in the setting or at the event in question. “Neighbors” are people nearby who are affected by the event due to noise, distraction, harassment, etc.
- Officials and Other Interested Parties. List the names of officials/other interested parties in descending order of importance for those who contributed most significantly to the Principal Problem. “Officials” are public authorities responsible for health, safety, economic, and social issues associated with the environment in question. “Other Interested Parties” are private banks,

insurance companies and other private/quasi-public parties and community organizations such as area business associations, area schools, and local faith-based groups.

### Worksheet G3 – Alcohol, Tobacco and Other Drug (ATOD) Problem Action

Worksheet G3 describes Section C, *Environmental Services Provided for the Reporting Year* that are selected to reduce or eliminate ATOD Problems in Section B, *Target Environments*. *Environmental Services* are basic policies and practices that can be used for environmental change to reduce risks associated with a target environment. *Environmental Services* may be used in combination to counter problems in a specific environment. Using several *Environmental Services* at one time can create a synergistic effect that is greater than the sum of its parts.

Worksheet G3 also describes the *Approaches* that are taken to implement *Environmental Services*. It may be desirable to use several *Approaches* in combination to implement a given *Environmental Service*.

- **Principal Problem.** List each Principal Problem identified on Worksheet G1 (Problem 1, etc.) on a G3 Worksheet. Use a separate G3 Worksheet to list each problem separately. To enter a code for the problem, refer to ADP 7235G, Section B3, *Problems*. Enter the problem type that most closely corresponds to the Principal Problem (e.g., (a) *Public Inebriation/Public Drinking*, (b) *Violence*, etc.).
- **Environmental Service.** The *Environmental Service* line describes the service that is to be applied to prevent the Principal Problem listed on this Worksheet. Enter the appropriate *Environmental Service* Code by referring to ADP 7235G, Section C (e.g., (a) *Zoning Ordinances for Alcohol Outlets*, (h) *State ABC Regulations Passed/Improved*, etc.).
- **Approach.** Under each *Environmental Service*, several lines are provided to specify *Approach* activities that will be undertaken to implement the *Environmental Services*. This is where action must be taken to modify high-risk environments. Each *Approach* activity that is used to implement the *Environmental Service* should be noted separately. In Section B3, *Approaches*, select from one of the eight types. Note that vigorous environmental initiatives may apply mutually-reinforcing, overlapping *Approach* activities that support several *Environmental Services* simultaneously.

Example: Suppose that a local prevention coalition has decided to stop the illegal sale of retail alcohol beverages to underage youth through off-sale outlets. The prevention coalition's problem analysis (see Worksheets G2a, G2b) has determined that young people purchase alcohol with almost no challenges, that retailers say they are doing all they can, youth are encouraged to buy by marketing aimed at youth, and by the location of off-sale outlets nearby places where young people gather, and that many retailers and youth believe there are no consequences involved in providing youth access. In response, the coalition has chosen to apply the *Environmental Services* outlined below. Worksheet G3 denotes the selection of these *Environmental Services* and the selection of several *Approaches* to implement them.

1. Educate local retailers on ABC laws and community standards. Approaches activities: ABC Licensee Education on Alcohol and Drugs (LEAD) training and a new RBS program to be developed with the local police department. Code *Environmental Services* as (k) *Commercial Host Training*. Note the *Approach* activities as *Education*, *Training*, and *Official Action*.
2. Conduct "compliance checks" by local police and the ABC (buys by underaged decoys set up to test whether retailers sell to underaged buyers). *Approach* activities: conduct compliance checks according to ABC guidelines; include discussion of compliance checks in the media

campaign described above. Code the *Environmental Service* as (o) *Improved Enforcement*. Note the *Approach* activities as *Official Action* and *Media*.

3. Conduct a multifaceted, continuing campaign to encourage removal of advertising and merchandising strategies that appeal to young people. *Approach* activities: create a media program to alert the public of problematic current sales practices and warn retailers of impending ABC compliance checks; involve young people to visit stores to survey practices and talk to managers; hold TV press conferences at “best” and “worst” stores. Code *Environmental Service* as (m) *Managing High Risk Advertising*. Note the *Approach* activities as *Media*, *Presentation*, *Training*, and *Networking*.
4. Mobilize for a moratorium on any new or expanded off-sale outlets in the community until sales to youth drop below 5 percent. *Approach* activities: create a constituency for the moratorium, help prepare a moratorium ordinance. Code *Environmental Service* as (a) *Zoning Ordinances for Alcohol Outlets, New*. Note the *Approach* activities as *Networking*, *Mass Rally*, *Presentation*, and *Official Action*.

- By Whom. Identify each party responsible for each *Approach* activity to implement each *Environmental Service*. List individuals who are accountable for the participation of local agencies and organizations. Note as Owner, Manager, Occupant, Neighbor, Officials or Interested Parties.
- Time Frame. Describe the time period when the strategy will be applied. When will it start? When will it end or will it continue indefinitely? Will it be periodic?

#### **Worksheet G4 – Approach Activity Log**

A county or service provider may want to keep an “Approach Activity Log” for each *Environmental Service* to show how implementation activities achieve results or to show where difficulties have been encountered. This information can be used internally for program planning, externally for program evaluation, and for informing other communities about the initiatives.

- Environmental Service and Approach. List one *Environmental Service* with just one *Approach* from Worksheet G3, using the codes built into the Worksheet.
- Activity. Summarize key activities undertaken to carry out the *Approach* on a periodic basis. The basis can be weekly, monthly, or quarterly depending upon the intensity and scheduling of the particular strategy.
- Activity Date. State the dates or date ranges on which the key activity actually occurred.
- By Whom. Enter the name of the individual(s) responsible for completing the reported activity.
- Result/Comment. Describe what happened as a result of the activity, and maintain files for documentation of both the intervention activity and the observed changes in the problem documentation.

It is recommended that a simple workplan/timeline be prepared for each *Approach*, and that it be kept in a multi-approach master schedule for the *Environmental Service* it is to support. This plan will help establish appropriate expectations among all participants and will help coordinate activities throughout the prevention program. It would be useful to append a one-page summary of the workplan to the first page of the log for each *Approach*.

#### **Worksheet G5 – Alcohol, Tobacco and Other Drug (ATOD) Problem Results**

Worksheet G5 records changes in the ATOD problems that occur apparently as a result of prevention efforts directed at the ATOD problem environment.



Note that decreases in ATOD problem-indicator data across time do not always mean that the prevention initiative is having a useful effect in reducing ATOD problems. Observed reductions in local problem-indicator data must be checked with external indicators before claiming a successful local prevention effort. Additional review is needed to rule out the possibility that apparent good results of a local effort are really the result of other factors at work in the surrounding region or state. For example, the fact that California DUI rates have been dropping steadily statewide for the past fifteen years must be taken into account in making claims for the effects of local DUI prevention programs.

- Principal Problem. List the principal problem from G1.
- Baseline Evidence. This is baseline evidence originally collected to show the presence of the problem.
- Change Evidence. This is evidence collected at a later time to document changes in the continuing presence of the problem.
- Dates. Enter the dates the data were collected, or the date the data were published if data collection dates are not available.



# Worksheet G1

## Alcohol, Tobacco and Other Drug (ATOD) Problem Environments

### Environmental Strategy

ADP 7235G

Prevention Activities Data System (PADS)

Service Provider: \_\_\_\_\_

Date: \_\_\_\_\_

Preparer: \_\_\_\_\_

### Problem Environments

Description \_\_\_\_\_

Service Population \_\_\_\_\_ Code \_\_\_\_\_ (ref. ADP 7235G, B4)

Location: Address \_\_\_\_\_

**OR**

Geographic Area \_\_\_\_\_

Type of Place/Event \_\_\_\_\_ Code \_\_\_\_\_ (ref. ADP 7235G, B1 & B2)

Problem Time Frame (When) \_\_\_\_\_ (Frequency) \_\_\_\_\_

Name of Owner/Property Manager \_\_\_\_\_

### Principal Problems Associated with Environment

Problem 1 \_\_\_\_\_ Code \_\_\_\_\_ (ref. ADP 7235G, B3)

Evidence: \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Problem 2 \_\_\_\_\_ Code \_\_\_\_\_ (ref. ADP 7235G, B3)

Evidence: \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Problem 3 \_\_\_\_\_ Code \_\_\_\_\_ (ref. ADP 7235G, B3)

Evidence: \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_



## Worksheet G2a

### Alcohol, Tobacco, and Other Drug (ATOD) Problem Sources

#### Environmental Strategy

ADP 7235G

Prevention Activities Data System (PADS)

Service Provider: \_\_\_\_\_

Date: \_\_\_\_\_

Preparer: \_\_\_\_\_

Principal Problem (refer to Worksheet G1: use one worksheet for each problem)	Principal Problem Code (refer to ADP 7235G, Section B3)
<p style="text-align: center;"><b>Name</b></p> <p>Owners/Managers</p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p> <p>Occupants/Neighbors</p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p> <p>Officials/Other Interested Parties</p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p>	<p style="text-align: center;"><b>Contributions To The Problem</b></p>  <p>_____</p> <p>_____</p> <p>_____</p>  <p>_____</p> <p>_____</p> <p>_____</p>  <p>_____</p>

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## Worksheet G2b

### Alcohol, Tobacco, and Other Drug (ATOD) Contributions to Approaches

**Environmental Strategy**

ADP 7235G

Prevention Activities Data System (PADS)

Service Provider: \_\_\_\_\_

Date: \_\_\_\_\_

Preparer: \_\_\_\_\_

Principal Problem (refer to Worksheet G1: use one worksheet for each problem)	Principal Problem Code (refer to ADP 7235G, Section B3)
<p style="text-align: center;"><b>Name</b></p> <p>Owners/Managers</p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p> <p>Occupants/Neighbors</p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p> <p>Officials/Other Interested Parties</p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p>	<p style="text-align: center;"><b>Approaches</b></p>   <p>_____</p> <p>_____</p> <p>_____</p>   <p>_____</p> <p>_____</p> <p>_____</p>   <p>_____</p>



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## Worksheet G3

### Alcohol, Tobacco, and Other Drug (ATOD) Problem Action

**Environmental Strategy**

ADP 7235G

Prevention Activities Data System (PADS)

Service Provider: \_\_\_\_\_

Date: \_\_\_\_\_

Preparer: \_\_\_\_\_

PRINCIPAL PROBLEM		PRINCIPAL PROBLEM CODE (ref. Worksheet G1; use one worksheet for each problem)			
Course of Action		By Whom		Time Frame	
	Note Approach Code from Section B3	Name of Person	Category	Start	End
<b>Environmental Service A:</b>					
Approach (1)					
Approach (2)					
Approach (3)					
<b>Environmental Service B:</b>					
Approach (1)					
Approach (2)					
Approach (3)					
<b>Environmental Service C:</b>					
Approach (1)					
Approach (2)					
Approach (3)					



## Worksheet G4 Approach Activity Log

**Environmental Strategy**  
ADP 7235G  
Prevention Activities Data System (PADS)

Service Provider: \_\_\_\_\_  
Date: \_\_\_\_\_  
Preparer: \_\_\_\_\_

<b>ENVIRONMENTAL SERVICE</b> (refer to G3; use this log for only one Environmental Service)	<b>CODE</b> (refer to ADP 7235G, Section C)
<b>APPROACH</b>	<b>Note Approach</b> from ADP 7235G, Section B3
Activity	Date
By Whom	
Result/Comment	
Activity	Date
By Whom	
Result/Comment	
Activity	Date
By Whom	
Result/Comment	



## Worksheet G5

### Alcohol, Tobacco and Other Drug (ATOD) Problem Results

**Environmental Strategy**

ADP 7235G

Prevention Activities Data System (PADS)

Service Provider: \_\_\_\_\_

Date: \_\_\_\_\_

Preparer: \_\_\_\_\_

<b>PROBLEM ENVIRONMENT</b> (description from G1)	
Principal Problem 1	
Baseline Evidence:	Date
Change Evidence:	Date
Principal Problem 2	
Baseline Evidence	
Change Evidence	
Principal Problem 3	Date
By Whom	
Result/Comment	





## ENVIRONMENTAL STRATEGY -- ADP 7235G

(To view the ADP 7235G form, click on Forms as listed on the PADS introductory page)

ENVIRONMENTAL STRATEGY -- ADP 7235G

(To view the ADP 7235G form, click on Forms as listed on the PADS introductory page)

## APPENDIX A

### SERVICE POPULATIONS DEFINITIONS

The following are definitions provided by The Center for Substance Abuse Prevention (CSAP). An asterisk indicates a CSAP designated high-risk population.

**Business and Industry**-Individuals who manage or work in for-profit businesses or industry. Examples are small businesses, companies, corporations, industrial plants, and unions.

**\*Children of Substance Abusers**-Youth and adults who are children of substance abusers. Examples are adult children of alcoholics, children whose parents abuse alcohol or other drugs, and children raised in or chronically exposed to situations involving substance abuse.

**Civic Groups/Coalitions**-Members of civic organizations, nonprofit organizations, and community coalitions. Examples are men's and women's State or local civic groups, nonprofit agency boards of directors or staff, community or statewide coalition members, community partnership groups, and community task forces, alliances, and similar community organizations.

**College Students**-Youth and adults enrolled in public or private institutions of higher education, including enrollees in universities, colleges, community colleges, technical colleges, and other institutions for advanced education.

**\*Delinquent/Violent Youth**-Youth who display risk factors for delinquency or violence or who have been determined to be delinquent or violent. Examples are youth declared delinquent by a state child welfare system, youth who have been arrested for juvenile delinquent behavior, youth who are chronically truant, and youth who display chronic or periodic violent behavior, including youth who display antisocial behavior (e.g., chronic fighting, hitting, using weapons).

**\*Economically Disadvantaged**-Youth and adults considered to be underprivileged in material goods due to poor economic conditions. Examples are youth and adults living in poor housing conditions or who are enrolled in state or federal public assistance programs.

**Elementary School Students**-Youth enrolled in public or private elementary schools in kindergarten through grade 5.

**General Population**-Youth and adult citizens of a state/county rather than a specific group within the general population.

**Government/Elected Officials**-Individuals holding government positions, including those who have been elected to public office. Examples are government workers; mayors; city administrators; city or county commissioners; supervisors; freeholders; or other elected officials; state legislators and staff; and members of the U.S. Congress and their legislative staff.

**Health Professionals**-Individuals employed by or volunteering for health care services. Examples are physicians, nurses, medical social workers, medical support personnel, medical technicians, and public health personnel.

**High School Students**-Youth enrolled in public or private high schools (generally grades 10 through 12) and home-study youth in these grades.

**Law Enforcement/Military**-Individuals employed in law enforcement agencies or in one of the U.S. Armed Services. Examples are police, sheriffs, state law enforcement personnel, and members of the National Guard, Army, Navy, Marines, Air Force, and Coast Guard.

**Lesbian/Gay/Bisexual/Transgender**-Individuals who identify themselves as emotionally and physically attracted to others of the same gender or male and female cross dressers, transvestites, female and male impersonators, pre-operative and post-operative transsexuals.

**Middle/Junior High School Students**-Youth enrolled in public or private middle schools or junior high schools including grades 6 through 8, 6 through 9, or 7 through 9, sixth-grade and seventh-grade centers, and home-study youth in comparable grades.

**Older Adults**-Adults considered to be older (in general, persons over 65 years of age). Examples are older persons living independently or residing in a nursing home or an assisted living facility.

**Parents/Families**-Parents and families, including biological parents, adoptive parents, and foster parents; grandparents, aunts and uncles, or other relatives in charge of or concerned with the care and raising of youth; nuclear families; and mixed families.

**\*People with Mental Health Problems**-Youth and adults with mental health problems. Examples are persons with diagnosable mental illness such as depression, severely emotionally disturbed youth, and the educable mentally retarded.

**\*Persons Using Substances**-Youth and adults who may have used or experimented with alcohol, tobacco, or other drugs. Examples are youth or adults charged with driving under the influence (DUI), driving while intoxicated (DWI), or being a minor in possession (MIP); social or casual users of illicit substances; and youth and adults who smoke tobacco or consume alcoholic beverages but who are not yet in need of treatment services.

**\*Persons with Physical Disabilities**-Youth and adults who have disabilities. Examples are individuals who are physically handicapped, hearing impaired, speech impaired, or visually impaired.

**\*Physically/Emotionally Abused People**-Youth and adults who have experienced physical or emotional abuse. Examples are victims of physical abuse, sexual abuse, incest, emotional abuse, and domestic abuse.

**Pregnant Women/Teens**-Women who are of physiological age to bear children and for whom the intent of prevention services is to ensure healthy newborns.

**Preschool Students**-Youth enrolled in, or of an age to be enrolled in, public or private preschool programs. Examples are youth enrolled in preschool programs, child day care, and Head Start programs and other children aged 4 or younger.

**Prevention/Treatment Professionals**-Individuals employed as substance abuse prevention or treatment professionals. Examples are counselors, therapists, prevention professionals, preventionists, clinicians, prevention or treatment supervisors, and agency director.

**Religious Groups**-Individuals involved with or employed in religious denominations or organized religious groups such as churches, synagogues, temples, or mosques. Examples are members, deacons,

elders, clergy, religious associations, ministerial associations, ecumenical councils or organizations, lay leaders, and religious education staff.

**\*Runaway/Homeless Youth**-Youth (and adults) who do not have a stable residence or who have fled their primary residence. Examples are street youth (and adults), youth (and adults) in homeless shelters, and youth in unsupervised living situations.

**\*School Dropouts**-Youth under the age of 18 who have not graduated from school or earned a general education development certificate and/or who are not enrolled in a public or private learning institution.

**Teachers/Administrators/Counselors**-Individuals employed in the education field. Examples are teachers, coaches, deans, principals, faculty, and counselors.

**Youth/Minors**-Children under age 18 who are not otherwise counted under one of the school grade categories. Examples are youth in recreation programs (camps, summer programs), youth in employment programs, and youth clubs or recreation centers.

**Other**-Individuals or organizations that do not fit in any of the above definitions or who represent a special population on which a particular State wishes to capture to prevention services data.

## **APPENDIX B**

### **ACRONYM DEFINITIONS**

ABC	Alcohol Beverage Control
ADP	Department of Alcohol and Drug Programs
AOD	Alcohol and Other Drugs
ATOD	Alcohol, Tobacco and Other Drugs
BAL	Blood Alcohol Level
CSAP	Center for Substance Abuse Prevention
CUP	Conditional Use Permit
DUI	Driving Under the Influence
EAP	Employee Assistance Program
FNL	Friday Night Live
LEAD	Licensee Education on Alcohol and Drugs
MDS	Minimum Data Set
MPF	Master Provider File
NNA	Negotiated Net Amount
PADS	Prevention Activities Data System
PHS	Public Health Service
RBS	Responsible Beverage Service
SAPT	Substance Abuse Prevention and Treatment
SDFSCA	Safe and Drug Free Schools and Communities Act

## APPENDIX C

### NEGOTIATED NET CONTRACT ELEMENTS

#### Research-based Substance Abuse Prevention Practices

The U.S. Department of Education posted four Principles of Effectiveness in the June 1, 1998 Federal Register that govern recipients' use of Safe and Drug Free Schools and Community (SDFSC) Act State Grant Program funds. Also, in September 1998 the Center for Substance Abuse Prevention (CSAP) proposed similar scientifically defensible prevention program accountability for CSAP funded programs.

Counties and their subcontractors are considered "grant recipients" for the purposes of this clause. Grant recipients agree to comply with and document that all prevention activities funded through this contract will be used in accordance with research-based prevention program approaches/activities.

The Department of Alcohol (ADP) has established the following composite, five-element requirement to assist grant recipients simultaneously meet program effectiveness and reporting requirements for both SAPT and SDFSC funds. ADP grant recipients shall follow these business processes:

- (1) **Assess Needs with Data:** Use data relevant to specific communities to identify concerns/risks related to alcohol and other drugs. Establish needs as clearly stated goals/desired outcomes. Analyze and define terms carefully to assure common understanding regarding the desired result.
- (2) **Prioritize & Commit to Purpose:** Use local or regional advisory bodies to establish prevention priorities. Clarify why the priorities are wanted; identify the benefits. Assure identified priorities and desired outcomes are culturally relevant to the participants and/or recipients.
- (3) **Establish Actions & Measurements:** Establish objectives and actions to determine the "who, what, where, when and how" to attain the intended outcome. Specify how prevention actions will be measured to monitor interim and final results.
- (4) **Proven Prevention Actions:** Select prevention activities/services based on identified theories or practices supported by evaluation/research evidence that substantiates that these actions are, or promise to be, effective for attaining the outcome intended. Select actions culturally relevant to the intended participants and/or recipients.
- (5) **Evaluate Measured Results & Improve:** Use goal and objective measurements to assess steps toward achieving the desired outcome as well as the final results. Apply this data to continuously refine, strengthen, and sustain the prevention effects.